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### HOMŒOPATHIC WORLD.

JANUARY 1, 1886.

#### FORWARD!

It is with unfeigned satisfaction that we are able to announce in our New Year's number that the proposal made in our pages a month ago has met with a practical response. The first step in the onward movement has been taken; and, as on so many former occasions, it is a layman who leads Among all the friends of homocopathy, lay or medical, there are few to compare in enthusiasm and energy with the respected Chairman of the London Homocopathic Hospital. As will be seen by our advertising pages, Major VAUGHAN MORGAN has offered to give a prize of twenty-five guineas for the best essay on medical treatment, having special reference to homocopathy. The essay is to be sent in not later than April 10th, the next anniversary of HAHNEMANN'S birthday; and there can be little doubt that in response to this many valuable expositions of our system will be forthcoming. The best of them—the one which secures the prize-will be printed and circulated far and As a first step nothing could be better than this. A short, pithy, and readable tractate, put into the hands of the public, the profession, and of that intermediate class between the two, medical students, cannot fail to arouse attention and prepare the way for what may follow.

How much need there is for action the article we publish in our present number from Dr. Dudgeon's pen illustrates in a remarkable way. Dr. Dudgeon shows by the correspondence he has had with various persons just what it

is we have to contend against—a conspiracy to boycott the only scientific system ever discovered of using drugs, and to insult and oppress those who believe in its efficacy. There are occasions when the best way to deal with an insult is to take no notice of it. But when the insult is not a personal one, but is dealt at a truth or a principle which the person insulted represents, then it is not meekness but cowardice not to notice it. There are scores, if not hundreds, of medical students who would gladly study homeopathy, and take it up, if it was not that they are afraid of the secret conspiracy they would have to face. As a result they do not study it at the only time when they have a fair chance of so doing, and the time and the chance slip by, and they follow in the old irrational, happy-go-lucky routine of drugging they have seen pursued by their teachers. So long as this is the case it is a matter of the most sacred duty on the part of those who have accepted the truth Hahnemann discovered to resist to the very uttermost the injustice of the boycotting conspiracy of orthodox medicine. Were all editors, publishers, journalists, and consultants who either practise or countenance the boycotting method treated as Dr. Dudgeon has treated his correspondents, fighting them on every point, and appealing to a public which knows what is fair play, if it does not understand that nondescript thing called "professionalism," to judge between the two-if this were done in every case the tyranny of orthodoxy would die of public scorn.

We trust Dr. Dudgeon's example will be followed by every disciple of Hahnemann whenever insult is offered to our Master in our persons. Some of us are disposed to be content that we are socially the equals of our orthodox colleagues, and that we can meet them as gentlemen. But that this is the case we have nothing to thank them for. Happily society is not composed exclusively, or mainly, of orthodox medical men; and, with all its faults, society does not stoop to consult medical prejudices before deciding whom it shall recognise. Nor have we anything to thank our colleagues for that we have the same legal standing as

they, and that our evidence as experts before a court of law is equal to that of any of them. But social and legal equality is not enough; we maintain our right to meet them not merely as gentlemen, but as professional equals. If we are content with anything less we are incurring the reproach of those who will hear their best friends slandered without a protest. So long as we are under the ban of orthodoxy it is HAHNEMANN that is insulted, and not we; it is the truth we hold that is at stake, and no miserable personal quarrel of our own.

We are glad to print a letter from an earnest defender of the faith, Dr. CLIFTON, of Northampton; and we here re-echo his invitation to our readers to send us their views on this important subject. Of course there will be opposition, but Britons should not be afraid of that. One proposal that has met with some favour is that an Association be formed to be called the MEDICAL REFORM LEAGUE, whose object should be to secure reform of medical practice and medical polity. Such a body might be formed at once, plans matured, and funds collected -for be it understood funds will be needed-in order that the work of the London Homeopathic Hospital and its generous Chairman may be effectively followed up in the spring and summer. We do not see the objection some have evinced to popular lectures, and can understand that such might be of the greatest service. It might be that some of our colleagues in the provinces would be glad to have a lecturer come occasionally to enlighten the inhabitants of the towns in which they practise; and it is more than a pity that our exceptional lecturing strength should not be utilised.

The first step has been taken. There must be no retrogression. It may be well to wait to see the effect of the first move before taking further open action; but in the meantime we must lose no (opportunity of gathering our forces—and we would include in our host all who endorsed our principles, whether lay or medical—and organising them into a disciplined army ready to strike for truth and justice when the proper time comes.

#### NOTES.

#### INTERNATIONAL HOMEOPATHIC CONGRESS.

WE print elsewhere a letter from the provisional committee of the coming International Congress to be held at Brussels in July or August next, asking that all papers intended for the Congress may be sent to them not later than May 1st. The committee also make a strong appeal—in which we heartily join—to all who possibly can, to unite with them in the endeavour to make the Brussels Congress a notable success.

#### DR. WILKS AND "SCIENCE."

When Mr. Matthew Arnold flattered the medical profession by telling it that its distinguishing quality was "lucidity" he had evidently never read anything written by Dr. Wilks. In his recent address at Birmingham Dr. Wilks remarked that he regarded the select number of men (Drs. Brunton and Co.) engaged in experimental pharmacology as "the most scientific men in the profession;" and of experimental pharmacology and its application to practice he said, "I cannot regard the method as truly scientific." Nothing, in his opinion, had come out of it but nitrite of amyl. We are inclined to ask, what then is science? In medicine everything that has to do with experiments on animals is "scientific;" and to be "scientific" is to be entirely admirable, no matter how painful to the subject of experiment, or how harmful to the practice of medicine, or how utterly opposed to common sense. According to Dr. Wilks the only scientific method of healing the sick is preventing them getting ill. Dr. Wilks, we believe, is an Englishman.

#### THE NITRITE OF AMYL MYTH.

But unhappily for Dr. Wilks his one good result of experimental pharmacology cannot be allowed to pass. Our contemporary the *Zoophilist* thus disposes of the claims put forward on behalf of this much bepraised drug:—

"It is really time that the nitrite of amyl myth were once for all dispelled. It would be imagined from Dr. Brunton's writings and those of his admirers that from seeing certain effects of the drug on animals he forthwith inferred that it would cure angina pectoris and used it in the next case that presented. Nothing of the kind

happened. Drs. Gamgee and Brunton did experiment on animals with nitrite of amyl; and they discovered what any one by sniffing at a bottle containing the drug could not help discovering—namely, that it relaxed the smallest bloodvessels. But even that did not suggest to Dr. Brunton that the drug could relieve angina pectoris. He had a case under his care for six months, and it was only after he had tried for many weeks aconite, digitalis, lobelia, iodide of potassium (until purpura was produced), chloroform, brandy, and bleeding, that as a last resort—not as a primary induction—it occurred to Dr. Brunton that nitrite of amyl might be given, which was done with temporary relief. Dr. Brunton's theory of its action, as Dr. George Johnson pointed out (see British Medical Journal, June 23rd, 1877), cannot be maintained. There is no proof that angina pectoris depends on high arterial tension; on the contrary, Dr. G. W. Balfour has shown (Diseases of the Heart) that in one of his cases the patient was only free from pain when the tension was high. Again, choloform, brandy, and bleeding relaxed arterial tension, but did not relieve the patient like amyl nitrite. And further, Dr. Balfour has also shown in one case under his care, that two specimens of amyl nitrite—one that was fresh and one that had been kept some time-would both relax arterial tension, but only one (the freshly prepared) would relieve the pain; proving thereby that the relaxation of arterial tension has nothing to do with the pain-relieving property of the drug, and demolishing completely Dr. Brunton's pretension that the discovery of the use of the drug was the scientific result of experiments on animals. It was, in fact, simply a lucky fluke. Moreover, it should not be forgotten that nitrite of amyl never cures the disease; it only gives temporary relief in a small proportion of the cases."

#### Dr. WILKS AND HOMOSOPATHY.

WE are not surprised to hear that Dr. Wilks strongly objects to homeopathy. He does not object to it because it fails to cure disease, but for other reasons. (1) Its foundation is physic-giving.—According to Dr. Wilks's views, the chief objection to a system of administering drugs is that it is founded on drug administration! This is a fair example of orthodox medical "lucidity." (2) His second objection is that it is founded on the treatment of symptoms.—This is quite a mistake; but if it were true, and the treatment of symptoms (which is a true description of much allopathic practice) resulted in the cure of disease, what would be the objection? (3) The third objection is that "every lady can carry her chest of medicines in her pocket, with a little book containing directions for the use of its contents"! To the orthodox mind this is a highly objectionable proceeding—no matter if the ladies cure more patients in a week than Dr. Wilks and his "scientific" pharmacologists can cure in a lifetime.

#### Upside-down Therapeutics.

WE learn from the Deutsche Illustrirte Zeitung that a new method of treating diphtheria, or rather we should say of treating patients suspected of diphtheria, or who may be exposed to the causes of diphtheria, has been invented, and is practised by Dr. Ringk, of Berlin. His mode of procedure is as follows: "By means of a spoon fashioned in the form of an elongated tube a mixture of turpentine and olive oil is poured into the nostrils of the suspected patient three times a day. During the operation it is necessary to make the patient stand on his head (otherwise, of course, the delectable mixture would immediately flow out). In addition to this the tonsils and fauces are mopped over with the same fluid every three hours. This mixture keeps the microbes at a distance. At the same time a teaspoonful of oil of turpentine is given internally [whether every three hours or three times a day is not stated]. This removes the chief danger." Dr. Ringk allows that "the oil of turpentine will injure the kidneys, but that is a little inconvenience which can be remedied by-and-by." We trust that our readers who may be anxious about diphtheria will submit to this heels-overhead treatment. It is at once simple and original.

#### COUNT MATTEI IN DIFFICULTIES.

According to the Tribune de Genève (30th Sept., 1885) the Court of Appeal in Bologna has confirmed the verdict given against Count Mattei for his libels respecting Professor Giordan, of Genoa, and Dr. Natili, of Munich. The Count is condemned to pay a fine of 400 francs, damages of 2,000 francs to each of the plaintiffs, the publication of the verdict in French, and the costs of the process. In addition to this, the Tribunal of Commerce in Geneva has condemned him to pay 34,672 francs to the apothecary Sauter, of that town, together with the costs of the civil process. It is quite probable that the noble inventor of electro-homosopathy deserved his punishment, but considering the immense profits he must have made by the sale of his wonderful remedies, we have no doubt that he can afford to pay for his amusements.

#### An Oxygen Exposé.

OXYGEN is a very powerful medicinal agent, and if its administration were more easy and less complicated it would

be much more extensively used than it is. In America it has come into extensive use through the efforts of certain medical men who have given special study to the subject. Among others Dr. Wm. B. Clarke, of Indianapolis, has done some very useful work with oxygen. Once having become a popularly-known remedy, the opportunity for quacks had arrived. Dr. Clarke has succeeded in exposing one (or two) of these. A certain Mr. F. G. McGranaghan and a Dr. Lennard (if these are not two names for the same individual, which is doubtful) have been doing a brisk trade in "oxygen," supplying it much more cheaply than others could do. According to their pamphlet, this is how it is made (in the authors' own words and spelling):—

#### "COMP. OXYGEN TREATMENT.

B. Nitrate Amonia... ... ... 25 parts. Carbnate Ferri ... ... ... 1 part.

Mix Put in Retort, apply gentle heat, till whole Compound becomes to a boiling heat, then add heat gradually, and conduct Oxygen to the Tank.

#### "HOME TREATMENT OF OXYGEN.

 Nitrate Amonia...
 ...
 1 ounce.

 Chlorate Potassa
 ...
 1 dram.

 Alcohol
 ...
 2 ounces.

 Aqua Disliled
 ...
 14 ounces.

Aqua Disliled ... ... ... 14 ounces.

Mix. one teaspoonfull to Inhaler full of hot water. Inhale 2 or 3 times a day."

The "oxygen" produced by this process is nothing but "laughing gas." The price of "a treatment" by these impostors is ten dollars, and they have been carrying this on for some years. Dr. Clarke has done a public service by this exposure.

#### "CHANGE OF TYPE OF DISEASE."

When Hahnemann and his followers had succeeded in demonstrating beyond all possibility of doubt that the orthodox practice of indiscriminate blood-letting was not merely useless but highly destructive of life, certain amiable members of the profession, unwilling to condemn the practice of their forefathers and their own former practice, hit upon an explanation which enabled them at once to run with the hare and hunt with the hounds. Diseases had "changed their type;" for this reason blood-letting was no longer of use. Formerly diseases were much more "sthenic,"

and then blood-letting was the proper remedy. The following passage from the recently published Life of Sir Robert Christison (Vol. I., Autobiography) gives us his views of the question, and he was one of the most conspicuous upholders of the theory:—

"For many years past blood-letting has been entirely given up in almost all these diseases, so that I question whether any man under forty-five could now perform what is really a rather nice operation to perform well. The present generation of practitioners, indeed, have not only given it up, but are constantly railing at their precursors for their bliodness and destructiveness in ever using it at all. My general answer is that acute local inflammations, during the first half of my life, were attended with a violence of arterial action unknown in the latter half, and that this is the simple reason why blood-letting was adopted in the early and abandoned in the later period. . . All my professional brethren old enough to have seen both agree with me that for a long time past they have never met with such pulses, for force and hardness, in pneumonia, rheumatism, pleurisy, nephritis, etc., as they constantly encountered in their early days."

There can be no doubt that diseases have "changed their type" since blood-letting was abandoned, and there can be very little doubt that the abandonment of blood-letting is the chief factor in that change. The "change of type" commenced among the patients of the homeopathists.

THE London Homocopathic Hospital has had more inpatients during the month of December than at any previous period. The number reached seventy-four, almost every available bed being filled. It is hoped that funds will be forthcoming to enable the committee to open the Bayes ward at an early date.

DR. BLACK NOBLE will read a paper at the next meeting of the British Homosopathic Society on January 7th. The title of the paper is A Retrospective Glance at the Cases which have Terminated Futally during Six Years and a Hulf of General Practice, with Special Reference to some Cases of Acute Tubercular Meningitis.

In the name of the Children we beg to thank those of our readers who so generously sent contributions of toys to the Children's Ward in answer to our appeal.

#### ORIGINAL COMMUNICATIONS.

#### MEDICAL BOYCOTTING.

By Dr. R. E. Dudgeon.

It is the boast of the representative writers on medicine, that though their art is in a very backward state, they are zealously endeavouring to improve it by every means. They assure us that they are willing and eager to receive information from every quarter, that they hasten to inquire into every new means and method offered to them which has the slightest claim to give greater certainty in the cure of disease than the means and methods they have hitherto employed, which they modestly and humbly admit still leave much to be desired.

But, on the other hand, they as frequently affirm that medicine is a science, that it has made prodigious strides of late years, and that it has well-established principles, which entitle it to take high rank among the natural, and almost constitute it one of the exact, sciences.

But if we inquire a little further we shall find that orthodox medicine is not a science, and that it has not, and never had, any principles at all. It has not even any fixed rules as an art. The art of medicine is the treatment of disease with a view to its cure; but what fixed principles or rules does it possess? The fashions that prevail in medical treatment, which change as often as do those of ludies' dresses, show that medicine can scarcely claim to be a respectable art, for every other art has some fixed principles and invariable rules, but medicine has actually none. one time bleeding is the panacea for almost every disease; at another purgative medicines are the universal remedy; these are superseded by low diet, that by stimulants; then we have the age of expectancy; next there is a run on bromide of potassium, chloral, quinine, and what not. This is not science, it is not even art. What is medicine then? It is a creed, but a creed with a symbol containing evervarying positive articles and one fixed and immutable negative article. The mutable positive articles depend on the therapeutic fashion of the day; the immutable negative article, which never varies, is, "I do not believe in homeopathy." Curiously enough, this negation of belief is held with much more pertinacity than any positive belief whatever. It has a strange effect upon the utterances of the

learned exponents of orthodox medicine. When discoursing of the medical art—their own medical art—they acknowledge freely, as Dr. Wilks does in his recent address, that it has "no scientific basis," or as Sir J. Forbes did, "that it is so bad, it must either mend or end," or, as Virchow did, "that there is no rational therapeutics." But the moment homeopathy is mentioned they stiffen up immediately, and call theirs the only "rational," the only "scientific," the only "regular" art, and homoeopathy, compared with it, is delusion, hallucination, quackery and imposture. And yet those who advocate homeopathy have gone through the same medical education, and possess the same professional qualifications as themselves, and their own handbooks of therapeutics borrow largely from the homoeopathic materia medica—so largely, indeed, that if the methods and remedies taken from us were eliminated from their most popular textbooks, such as those of Ringer and Phillips, there would remain very little of value in them.

The majority of the medical profession have been taught by their instructors in the schools and in the press that homeopathy is an utterly unscientific system without any foundation in nature. It has been represented to them as a mode of treatment by infinitesimal and powerless doses of medicines, directed against individual symptoms, or else by concentrated poisons; that its practitioners do not believe in the pretended therapeutic rule which they profess, and that in cases of serious disease they resort to the "rational"

Adverse criticisms of their own practice like the subjoined, which I take from the Brit. Med. Journ. for December 5, 1885, are by no means rare in the orthodox school: "Judging by their own letters, many of your correspondents administer drugs in what seems a reckless and unscientific manner. Others must remark this as well as I. Strychnine, arsenic, digitalis, and aconite are favourite remedies in all sorts of disease. Upwards of forty years' experience has convinced me that most cases recover, not on account of, but in spite of, the drugs administered. Pills and mixtures containing many poisonous drugs are commonly prescribed even when the practitioner is quite in the dark as to what the cause of the disease may be. With some the rule is, when the cause is unknown, to use a great many poisonous stuffs in the hope that one of them may possibly hit the enemy. A wiser and safer course would be, when the diagnosis is uncertain, to give in the name of remedy something that cannot possibly injure the patient. A little ventilation of this subject cannot possibly do harm, although I am quite aware that in writing as I do I expose myself to the charge of heresy. I am, etc., Duncan Mackay, M.D., Inverness." No fear, good Duncan, that you will be accused of heresy for inveighing against the therapeutics of your school, that is what is constantly being done by the foremost authorities of allopathy. But just try to propose a better, a more scientific system—homocopathy for instance—and you will soon find yourself charged not only with heresy, but with many other crimes and iniquities.

methods of orthodox physic, and are therefore dishonest, professing one thing and practising another. They are told that the so-called provings of medicines on the healthy human body are purely imaginary or invented symptoms, and teach nothing concerning the real action of the drugs. They are assured by their teachers that homeopathic practitioners are either knaves or fools, impostors or dupes. These misrepresentations have been perpetrated so long, they have been so often repeated ex cathedra and in the press, that they have become stereotyped, as it were, in the allopath's stock of knowledge, and those who have the teaching of the rank-and-file of the profession, the men of light and leading among them who occupy the professional chair or the editorial tripod, take good care that those who look to them for guidance and instruction shall never know the truth with regard to homeopathy, but shall continue to see it only through their ingenious distorting glasses. Why the teachers who are in the habit of giving a tolerably accurate account of other medical doctrines and systems should almost invariably present such a grotesquely erroneous view of homocopathic doctrine and practice "I well may guess but may not say," for that would be to trench on the perilous ground of motives, which it is well to keep clear of. Suffice it to say that our opponents have what they conceive to be excellent reasons for perpetuating their false legend of homoeopathy, and refusing to receive from its partisans and adepts any correction of their misleading representations of the doctrines and practice of Hahnemann. Numerous instances might be cited of misrepresentations of homeopathy by allopathic writers which have been repeated and persisted in, and rectifications by partisans of homeopathy simply rejected. The latest instance of this kind I will now relate.

The Lancet of November 28th, 1885, had a leading article on Dr. Wilks's Address to a Medical Society in Birmingham, in which the following passage occurs:—

"One of the most important points of Dr. Wilks's address was that in which he showed the scientific and essential objection to homosopathy as essentially a drug-system whose 'foundation is physic-giving and the treatment of symptoms.' Here is the very kernel of the quackery, and Hahnemann was not ashamed of it if his followers are. Every disease, according to him, has its specific remedy or drug, to be selected on the fanciful principle that it will produce effects analogous to the symptoms of the disease. To remove the cause of the disease was not his principle, and he gave no opportunity

for the display of 'the real curative agents provided by the Almighty—drugs.' Equally important was Dr. Wilks's criticism on another favourite dogma of the homoeopaths—that the uses of medicines are to be ascertained by a study of their physiological action on healthy animals. His illustration of the failure of this principle for selecting remedies was very striking. Only in one case—that of nitrite of amyl for the relief of angina—has this principle been successful. In many others, as in the case of strychnia, conium, and phosphorus, the result has been either disappointing or actually harmful."

#### I wrote to the Editor of the Lancet as follows:-

"Sir,-In your leading article to-day you say that 'one of the most important points of Dr. Wilks's address was that in which he showed the scientific and essential objection to homosopathy as essentially a drug-system whose "foundation is physic-giving and the treatment of symptoms."' It must surely be equally important that the case against homocopathy should be rightly stated. It can hardly be considered as an objection to homoeopathy, scientific or otherwise, that it is essentially a drug-system, seeing that it has only to do with that part of the medical art which is concerned with the relation of drugs to diseases. To call it a system of treatment of symptoms is incorrect. According to Hahnemann, all the symptoms, objective and subjective, which can be learned by examination of the patient, reveal the disease, they are the features which together make up the morbid picture—the disease—and the pathogenetic effects of drugs are to be studied in order to discover one which shall present a similar array of symptoms or a similar morbid picture, thereby indicating a similar pathological state to that of the patient; that is to say, as similar as can be hoped for between natural and drug-disease. This is treatment of the actual disease as revealed by the only signs it gives of its existence. Hahnemann says, remove the cause if you can ascertain it; but to imagine a hypothetical cause and treat that has seldom answered the expectations of the practitioner, as his hypothetical cause is usually erroneous, and his weapons—the drugs -are mostly unknown to him in their pure effects on the healthy human system.

"Homosopathists do not treat symptoms in the way of selecting one prominent symptom of a disease and directing attention to that solely; as, for instance, giving an antipyretic for the heat, a hypnotic for the sleeplessness, an anodyne for the pain of disease, as though such single symptom constituted the whole disease, or that

its removal or suppression would remove the whole disease.

"That homoeopathy is a drug-system is undeniable, but that Hahnemann did not consider the medical art to consist solely in giving drugs is evident from all his writings. In 1784, and again in 1792, he wrote two remarkable works inculcating those very maxims of hygiene, as regards exercise, bathing, fresh air, cleanliness, prevention of epidemic and infectious diseases, which are so strongly advocated nowadays, but which were generally neglected at the time he wrote, and for many years afterwards. In 1792 he treated insanity in a special institution by the same mild measures as are associated in this country with the name of Conolly. He writes:—

I never allow any insane person to be punished by blows or other



painful corporal inflictions, since there can be no punishment where there is no sense of responsibility, and since such patients only deserve our pity, and cannot be improved but must be rendered worse by such rough treatment.' At the time he thus treated his insane patients, and for many years thereafter, the treatment of the insane all over Europe was, as a rule, barbarous and brutal.

"Hahnemann's followers by no means confine themselves to mere drug-treatment, but employ all the rescurces of hygiene as freely as their orthodox colleagues, and do their best, as far as the exigencies of active practice will permit, to make their little contributions to

the sum of medical science.

"Neither Hahnemann nor any of his disciples, as far as I am aware, ever uttered any such herbalistic nonsense as Dr. Wilks credits them with, when he represents one of them as saying: 'Since it has pleased the Almighty to visit His children with various ailments, so He has provided in the herbs of the field some remedy for their cure,' for many of the most important drugs of the homosopathic materia medica are derived from the mineral and animal kingdoms, and neither Hahnemann nor his disciples, in the treatment of disease,

limit themselves to the prescribing of drugs.

"I agree with you that Dr. Wilks was quite right in alleging the uselessness (to his school) of what you call 'the favourite dogma of the homoeopaths, that the uses of medicines are to be ascertained by a study of their physiological action on healthy animals,' for that is precisely what we have for years been telling you. If you reject the homoeopathic therapeutic employment of medicines, a knowledge of their effects on healthy animals, even on healthy human beings, can be of no therapeutic value to you; but granted the truth of the homoeopathic therapeutic rule, a knowledge of the physiological effects of drugs on the healthy organism is essential to the successful application of that rule.

The practice of medicine according to the homoeepathic therapeutic rule is now carried on by many thousands of medical men all over the world, men who possess the same professional qualifications and may be credited with as fine a sense of honour and as great a love of truth as any of those who practise on any other system, and you acknowledge the importance of homoeopathy when you say that Dr. Wilks's remarks upon it constitute one of the most important parts of his address; would it not then be as well to cease to talk of the system as quackery, a word which seems to have slipped inadvertently into your otherwise unobjectionable remarks, and appears to be a remnant of the old bad spirit which could never mention

¹ The following passage from Dr. Wilks's address seems to be directed against homeopathy: "In upholding these views I am of necessity protesting against the so-called popular theory that diseases are so many entities whose symptoms are to be relieved by some drug; or, as I have seen it expressed in a book on the most widespread hereay of the day, that since it has pleased the Almighty to visit His children with various ailments, so He has provided in the herbs of the field some r-medy for their cure. This is both an untruth and an absurdity." If, as the context would seem to indicate, Dr. Wilks believes that the error of regarding, diseases as entities is a homeopathic dogma, he is entirely and utterly wrong. Hahnemann in many places ridicules the idea that diseases are entities, a doctrine which was prevalent in his days, and which he inveighed against in the plainest terms.

Hahnemann or homosopathy without the accompaniment of some insulting expletive?

"Your obedient servant, "London, Nov. 28th, 1885." "R. E. DUDGEON."

The Lancet, which ostentatiously displays "audi alteram partem" as its motto, as was expected, did not admit my letter to its impartial columns, but instead favoured me with this note printed in the smallest type:—

"Dr. R. E. Dudgeon takes exception to some of Dr. Wilks's remarks on homoeopathy and to our criticism. Our correspondent will not think us unkind if we do not insert his letter, the courtesy of which we gladly admit. We see no good to be done by any lengthened discussion of the principles of Hahnemann. Medical practitioners and cultivators of medical science have too much real work on hand for that to be profitable."

I quite admit the Lancet's excuses for not allowing the other side to be heard. There would certainly be "no good to be done" thereby to the cause advocated by the Lancet. It is curious, however, to remark that in the Lancet's view Dr. Wilks's misrepresentations of homeopathy form "one of the most important parts" of his address, but any rectification of those misrepresentations, which the Lancet adopts and applauds, is loftily dismissed as not "profitable." I can well believe that to give a fair and correct statement of the principles of Hahnemann might be very unprofitable to the Lancet, for nothing more annoys the average medical practitioner and reader of the Lancet and kindred periodicals than any attempt to act fairly and justly by the practitioners of homeopathy, and any display of fairness and impartiality might have a very unprofitable effect on their subscription lists. In a commercial point of view it does not pay to notice homoeopathy in any way, unless to ridicule or misrepresent it. That this is so would appear from a recent experience of the writer in the case of the Practitioner.

The publisher of Ameke's History of Homeopathy, at my request, sent an advertisement of the work to the publishers of the Practitioner, who refused to accept it. As the Practitioner had hitherto accepted the advertisements of homeopathic works, I immediately wrote to the chief editor, Dr. Lauder Brunton, mentioning the fact of the refusal of his publishers to insert the advertisement, and begging to be informed why an exception from the courtesy that had hitherto been extended to homeopathic advertisements was made in this instance. Dr. Brunton replied that "the pub-

lishing and editorial departments of the *Practitioner* are perfectly distinct, and I have nothing whatever to do with the advertising department, which is entirely conducted by the publishers themselves." On receiving this answer I wrote to the publishers of this periodical, Messrs. Macmillan and Co., begging to know the reason of their refusal to insert the advertisement of Ameke's work. In due course I received the following reply:—

"29 and 30, Bedford Street, W.C., 14th Nov., 1885.
"Sir,—In excluding homoeopathic advertisements from the *Practitioner* we are simply acting in conformity with what we understand is a rule of the profession. As Dr. Brunton and Dr. McAlister conduct the journal, we consider we are in a measure bound to act in conformity with the regulations of their profession. Neither they nor we are liable for such rules, but we do not consider it is in our interest to act otherwise in the circumstances.

"Your obedient servants,

"MACMILLAN AND Co."

As this was hardly a satisfactory reply to my letter, I wrote the Messrs. Macmillan as follows:—

"14th Nov., 1885. "Gentlemen,—In reference to your letter of this day's date, I may say that there is no 'rule of the profession' which prescribes the 'boycotting' of one set of doctors by another on account of differences in their mode of treatment. Were the medical profession to adopt any such rule, it would degrade itself to the level of a tradesunion, and I believe it still claims to be considered a liberal profession. The unwritten law of the profession from time immemorial inculcates complete tolerance and liberty of opinion and practice to all; so that you are bound by no regulation of the profession to exclude homoeopathic advertisements from the Practitioner because its editors happen to be medical men—which I understand to be your contention. Your other reason for your conduct is more plausible viz., that you conceive it to be your 'interest' so to act. Of that you are the best judges. I only wished to know if there was any reason for your altering, in reference to the work edited by me, your previous system of accepting homoeopathic advertisements. I have taken in the Practitioner from the commencement, but I shall now cease to do so, not because I think that an advertisement in it would be of any consequence to the book, but because I do not choose to subscribe for a periodical which displays such illiberality towards members of the medical profession whose views respecting therapentics differ more or less from those entertained by your editors, and I have little doubt that many of my colleagues will act likewise when they become aware of the circumstances. Possibly you may receive the compensation you no doubt expect from the accession to your subscription list of an equivalent number of the illiberal members of the profession who approve of your new departure.

"Your obedient servant,
"R. E. DUDGEON."

#### To this I received the following reply:-

"Bedford Street, W.C., November 25th, 1885. "Dear Sir,—We have delayed answering your letter of the 14th until we had consulted the editors of the Practitioner on certain points, and we now write with their sanction. We did not say that there was a rule of the profession which prescribed the 'boycotting' of one section of it; but we believe that there is a rule followed by the chief medical periodicals not to admit homoeopathic advertisements, or to make profit by their insertion. This is an entirely different thing from 'boycotting,' as we think you will see from the line of action pursued in the conduct of the Practitioner. The aim of the Practitioner has been to act fairly by every section of the medical profession, and the editors have given the name and the usual particulars regarding your book in the Bibliography, in order that the readers of the *Practitioner* may be informed of its publication and obtain it if they wish. At the same time we must consider the feelings of a large section of our readers who would certainly feel irritated by the recurrence of an announcement of the work, and for their sakes we must decline to advertise it.

"In following the line which we suppose to be right we must almost necessarily give a certain amount of offence to both parties. We have already given offence to some by admitting papers into the Practitioner which were written by men holding homoeopathic views, although these views did not appear at all in the pages in question, and we have been threatened with loss of subscriptions in consequence. We have now unfortunately offended you also by refusing to admit your advertisements, and you likewise threaten to cease your subscription. In spite of such threats we have hitherto done what we believed to be reasonable, and we shall still continue to

do so.

"We trust that on reflection this explanation of our motives and our practice will commend itself to your good sense, and that you will see that, however you may differ from us as to their advisability, there is no occasion for irritation on either side.

"We are, dear Sir, yours faithfully,
"MacMILLAN AND Co."

As this reply was not a bit more satisfactory than the first I again wrote:—

"Gentlemen,—I have no complaint to make of the conduct of the editors of the *Practitioner*, who have hitherto acted courteously

¹ My first note to the editors was written and sent in the beginning of November. The mention of the work in the Bibliography of the Practitioner is in the December number of that periodical, which of course had not appeared at the date of this letter. To philosophical inquirers interested in discovering the motives of people's actions it might seem a subject worth investigation whether the mention by the editors of the book in the Bibliography for December was meant as a sop for my supposed injured feelings as revealed in my note to them in November, or as an emphatic protest against the illiberality of their publishers, with whose advertising department Dr. Brunton assures me the editors have nothing whatever to do.



and as becomes the members of a liberal profession towards colleagues who hold different views on some points from their own. I would have been very much astonished if Dr. Lauder Brunton had acted otherwise, as I have always regarded him as one who has laboured diligently and earnestly to improve the practice of medicine, though I consider his methods faulty and not likely to lead to the attainment of his object. To have supposed him capable of acting illiberally towards colleagues engaged in a similar task though pursuing different methods would have been very repugnant to my feelings. I was accordingly quite pleased and satisfied with his disclaimer of responsibility for the advertising department of the Practitioner, and with his assurance that it was entirely conducted by the publishers.

"I am glad to observe that you do not repeat your allegation that your recent exclusion of advertisements of homosopathic works which you formerly accepted was in obedience to 'a rule of the profession,' for I know very well that, though some members of the profession may practise such exclusion, the medical profession has not, and could not, have such a rule without forfeiting its character as a

liberal profession.

"As you now put your illiberal rejection of advertisements of works by the homoeopathic school of medicine on the purely commercial ground that you think, if you admitted them, you might lose some of your subscribers, I can only again say that of that you are the best judges. You now say that it is the 'rule followed by the chief medical periodicals.' That it has been adopted by some I well know, but whether they are the 'chief' I cannot say. The Lancet, which has notoriously long acted in this way, has always been distinguished, in its editorial work, for its bigoted intolerance of everything relating to the homoeopathic system of therapeutics (therein differing from your editors), and while excluding advertisements of homeopathic works it has admitted advertisements of any works against homosopathy, which seems to me to deserve to be called 'boycotting,' and is certainly not 'acting fairly by every section of the medical profession.' As you now say you intend to continue to follow the rule which leads to such partial and offensive results, I can only say that I regret you should have formed this illiberal resolution, but at the same time I am glad to know that the editors of

¹ I am not singular in this opinion. Dr. Wilks in the address alluded to above says: "As regards therapeutics as a science I will not say much, because opinions seem to differ as to the true method of investigation. Those who are the most esteemed cultivators of this branch of medicine believe that the method is first to observe the action of a drug on a healthy animal or on man, and then make the result applicable to pathological states [notoriously Dr. L. Brunton's plan; see his last big book on Pharmacology]; and they thus raise pharmacology to a branch of science. For my own part, although not denying, I have been reluctant to hold this view in its entirety, because the method has seemed to me to have so often failed when put into practice, and so brought discredit on the therapeutic art." The Lancet pretands to believe that these remarks are directed against homeopathists, but it is hardly probable that Dr. Wilks would so depart from the traditions of his school as to call us "the most esteemed cultivators" of therapeutics, and we would certainly never put experiments on animals before those on man. But this is precisely what Dr. Brunton does, and he is undoubtedly one of "the most esteemed cultivators" of therapeutics in allopathic eyes.

the Practitioner, whom I have always hitherto respected as enlightened and courteous gentlemen, are not responsible for this discourtesy, which it seems is merely a trade manageuvre adopted by the publishers in the fancied interests of the circulation of their publication. The pity of it is that the illiberality of their publishers may be attributed to the editors by those unaware of the true circumstances.

"Your obedient servant,
"R. E. DUDGEON."

#### To this came the following reply:—

"29, Bedford Street, W.C., December 9th, 1885.

"Dear Sir,—We forwarded your letter to Dr. Lauder Brunton, and our delay in answering it has been caused by his absence from

town and delay in returning it to us.

"He and Dr. Macalister completely endorse our action in regard to the advertisements, and think you must have misunderstood our last letter, or you would not have written as you have done in your renly.

"They therefore wish us again to state to you that the aim of the *Practitioner* has always been to maintain a perfectly fair and impartial attitude to all branches of the medical profession, without fear or

favcur.

"The attempt to maintain this attitude must almost certainly offend extreme partisans, and great offence to extreme anti-homeopathists has already been given by the editors not refusing to admit papers from homeopathists, even when these papers contained no homeopathic doctrines. The demand for such a refusal by the extremists on one side the editors have considered unfair, and they have consequently refused to accede to it.

"The demand that homeopathic works should be advertised

"The demand that homeopathic works should be advertised month by month in the *Practitioner*, knowing that such advertisements would be an eyesore and annoyance to many of the readers, seems to be equally unfair, and therefore Drs. Brunton and Mac-

alister consider that we are right in refusing it.

"The editors think that a little consideration will show you that it is not trade reasons that have decided us in the course we have followed, for we have already lost by offending the extreme party on the other side, though we had nothing to gain by the admission of articles by homoeopathists, and we now run the risk of offending homoeopathists by refusing advertisements which would be to us a direct source of profit.

"We are, yours faithfully,
"MACMILIAN AND Co."

#### My answer was as follows:—

"9th December, 1885.

"Gentlemen,—You must be conscious of the weakness of your cause that you change your ground every letter you write, and seek to complicate and entangle the matter by mixing up with it things that are utterly irrelevant.

"The simple facts are these: I complained that an advertisement of a work edited by me was refused insertion in the Practitioner, con-

trary to the practice theretofore followed by that periodical of

accepting advertisements relating to homocopathy.

"I first addressed my complaint to Dr. Brunton. He replied assuring me that 'the publishing and editorial departments of the *Practitioner* are perfectly distinct, and that he had nothing whatever to do with the advertising department, which is entirely conducted by the publishers themselves.'

"I therefore applied to you to know the reason for your refusal. You said you acted in conformity with what you understood to be a

rule of the profession.

"I assured you that there was not, and could not be, any such rule. You then said you believed there was such a rule followed by the chief medical periodicals. I knew that had been the practice of some periodicals, but as you had not hitherto followed that practice it was evidently no rule that you considered yourselves bound by.

"You now change your ground once more, and tell me that you base your refusal on your knowledge that such advertisements would be an eyesore and annoyance to many of the readers of the Practitioner. You seem to wish to free yourselves from the onus of your refusal by telling me that the editors endorse your action, which is very likely, now that the act has been committed; but I have Dr. Brunton's assurance in his letter to me, before your attempt to justify yourselves, that he has nothing whatever to do with the advertising department, and you introduce irrelevant matter relating to the admission of papers into the Practitioner, which of course is purely an editorial matter; and, as I edited a medical periodical for nearly forty years myself, I hardly required to be assured by Dr. Brunton that the publishing and editorial departments of the Practitioner are perfectly distinct.

"The fact then remains that you, an influential firm of publishers of general literature, have lent yourselves, under what pressure I know not, to assist an intolerant section of the medical profession in treating another section of that profession as though they or their works were so vile and disreputable that their advertisements could not be admitted into a respectable periodical. It can, of course, never be believed by the non-medical public that mere differences of views on points of medical practice will account for the rejection of the advertisements of a medical work by a medical journal; that would appear to them as absurd as for a political newspaper to refuse

to advertise a work of different politics to its own.

"Those who originated this system of 'boycotting' homocopathists and their works intended that the public should thereby be taught to think us morally unworthy to be treated with ordinary professional courtesy. You lend the influence of your position as publishers to carry on this miserable persecution of medical men who have never injured you, and with whose views on medical matters you have no earthly concern; and, whether you like it or not, you must bear the odium that attaches to such as espouse other people's quarrels, and become their willing instruments in oppressing and insulting a not inconsiderable number of zealous and earnest cultivators of scientific therapeutics.

"Your obedient servant,

"R. E. DUDGEON."

The following reply to my letter was sent:—

"30, Bedford Street, 14th December, 1885.

"Dear Sir,—We beg to enclose the copy of a letter Dr. Brunton has written bearing on our recent correspondence, of which he has been cognisant from the first. We have now nothing more to say or explain, and it is without purpose to pursue the correspondence further.

"Dr. Dudgeon."

"Yours truly,
"Macmillan and Co."

#### [Copy.]

"Adrian House, Westgate-on-Sea, December 11th, 1885.

"Messrs. Macmillan and Co.

"Dear Sirs,—I perfectly approve of your action in the matter of refusing to admit homosopathic advertisements into the *Practitioner*, a refusal which I think Dr. Dudgeon ought to see from your former letter is only made in fairness to a large majority of your readers, not from a desire to 'boycot' any one.

"Although you acted without consulting me, your action was completely in accordance with the advice I should have given had I

been consulted.

"Yours very sincerely, (Signed) "T. LAUDER BRUNTON."

#### To this I replied :-

"14th December, 1885.

"Gentlemen,-I quite agree with you that it would be useless to

prolong the correspondence.

"I scarcely needed that you should send me a copy of Dr. Brunton's letter, for I stated that I had no doubt he would endorse your action—after it had taken place, although it did present such a decided contrast to his own previous action as editor towards his colleagues who hold views on therapeutics different from his own. He has now the satisfaction of finding that, in rejecting the advertisement of a homeopathic work without consulting him, you acted in accordance with the advice he would have given you if consulted—that is to say, that though, in the past editorial conduct of the Practitioner, he has acted courteously and tolerantly towards his colleagues of the homeopathic school, yet that in the publishing and advertising departments, with which he assures me he has nothing whatever to do, he quite approves of those colleagues being insulted by his publisher. It is, of course, hard to believe that any man of Dr. Brunton's acquirements and position could act in this manner, but as he implies this in his emphatic approval of your conduct, I am bound to believe him.

"I do not see, as, according to Dr. Brunton, I ought, how your refusal 'is only made in fairness to a large majority of your readers.' If that means that the refusal was, as you stated among your many reasons, because the advertisement would be an 'eyesore and annoyance' to some of your readers, all I can say is that the bibliographical notice of the book in the December number would be much more likely to annoy silly and unreasonable haters of homosopathy than an advertisement which every one knows is a mere trading affair,

with which editors have, as Dr. Brunton says, 'nothing whatever to do.'

"Your obedient servant,
"R. E. DUDGRON."

Probably this will terminate the correspondence, as the subject seems to be completely thrashed out, and I fear has already proved wearisome to the reader. It is painful to witness the wrigglings of a respectable firm of publishers, who have incautiously taken up an indefensible position, and now vainly attempt to justify themselves. Persecution for opinion is always odious, but it is doubly odious when perpetrated by those who have no interest or concern in the matter. The injustice of an intolerant majority towards a powerless minority of their own colleagues involves others besides themselves, and, as in this case, renders a respectable firm of publishers—who cannot be supposed to have any knowledge of the subject of controversy or bias towards one side or another-partners in a contemptible persecution of a body of professional men against whom they have no grievance whatever. The persistent denunciation of homeopathy by a large and influential portion of the medical profession has terrorised other publishers besides the Messrs. Macmillan, and has rendered it impossible for us to get our books published, not only by the medical publishers, but by publishers of general literature. It is right that the public should be made aware of this, for they are as much concerned as we in the improvement of medical practice, and it is difficult for them to learn what so nearly concerns their health when authors of homocopathic works are so heavily handicapped by this widespread conspiracy to stifle them.

Another unprofessional piece of persecution to which practitioners of homospathy are exposed is the refusal of professional intercourse or aid by their non-homospathic colleagues. It seldom or never happens that a practitioner of homospathy wishes for the opinion of any of his colleagues of the other school on the subject of treatment, but it occasionally happens that we or our patients desire the opinion of a specialist on some obscure or rare case of disease. Such a case of cutaneous disease recently occurred in my practice. The patient wished to have the opinion of a dermatologist on his case, and I willingly consented. A neighbour of mine, with whom I have a slight acquaintance, makes skin diseases his speciality, so I sent him a note,

begging him to meet me at the patient's house. In due course I received from him the following curious note:—

"November 12th, 1885.

"My Dear Sir,—I am much obliged to you for the compliment

you pay me in asking me to see your patient.

"I greatly regret that our different modes of practice, and my very precise views upon the questions involved in that difference, will prevent me from availing myself of the consultation you kindly propose. Should you feel inclined to recognise the fact that my particular position in connection with this matter is in no way founded on personal grounds, I should be very pleased to see your patient in the usual way.

"I am, etc., ——."

I need not give the name of my correspondent. I replied as follows:—

"November 12th, 1885.

"Dear Sir,—Your reply to my note requesting you to give me your opinion on a case of skin disease—dermatology being, as I

understand, your speciality—is a complete puzzle to me.

"You say, you regret that our different modes of practice (I suppose you know as little of mine as I know of yours, which is nothing at all), and your very precise views upon the questions involved in that difference, will prevent you meeting me in consultation. If differences in modes of practice prevent you meeting your colleagues in consultation, I fear your opportunities of consultation with your colleagues must be very limited, as it is a truism that in therapeutics doctors are proverbially liable to the reproach quot homines, tot sententies. What your 'very precise views' on the subject are I have not the slightest idea, but the conclusion to be drawn from the first part of your letter is that you refuse to meet me professionally.

"But in the second part you say, should I feel inclined to recognise the fact that your particular position in connection with the matter (I was not aware that you occupied any particular position in connection with that or any other matter) is in no way founded on personal grounds (what does it matter what it is founded on if it lead to the same result—professional ostracism?) you should be very pleased to see my patient in the usual way. Now the 'usual way' is the way I proposed, and any other way would be a very unusual way, so I am utterly at a loss to know what you mean. You refuse to meet me in the first part of your letter, and in the second, on some incomprehensible condition, you will be pleased to see my patient in the

usual way.'

"Possibly your opinion may be so valuable as to be worth obtaining on the terms and in the manner you intend to indicate, but which I suppose I am too dull to understand. As this is the first time in my practice of upwards of forty years that I have met with the slightest difficulty in getting the opinion of a specialist in any case, and as there are in London many dermatologists of equal reputation to your own, I will not put you to the trouble of seeing my patient, but will endeavour to get the opinion of some one who is not hampered by those 'very precise views' and that 'particular

position' which compel you to inflict an insult on a professional brother.

"Yours faithfully,
"R. E. DUDGEON."

These three little episodes, which occurred within a few days of one another, are specimens of the treatment to which practitioners of homosopathy are subjected by partisans of the dominant school of medicine and their aiders and abettors. 1. A medical journal gives a grotesquely erroneous account of homeopathy, and refuses to insert any rectification 2. The publishers of a medical of its misstatements. periodical which has hitherto admitted advertisements relating to homeopathy suddenly and without apparent reason refuse to accept an advertisement of a work on homeopathy. Apparently Juvenal's dictum, "Nemo repente fuit turpissimus," does not apply to homeopathists. We may have been treated for years by a firm of publishers as though we were in respectability on a par with manufacturers of meat-juice, maltine, or even lacto-peptine, when suddenly, without warning, they, who of course are no judges of the rights of a medical controversy, discover that we or our doctrines are so detestably bad that advertisements of our books may not be admitted into their advertising sheets. 3. A specialist requested to give an opinion on a rare case of cutaneous disease refuses to do so in the ordinary and only acceptable way.

The first two cases concern the medical profession chiefly. They give evidence of unfairness towards a considerable section of the profession, and betray a fear lest the readers of medical periodicals should become acquainted with the arguments and evidence in favour of a different system of therapeutics to that advocated by those periodicals. The third case concerns the public as much as the profession, or even more so. If a medical man from his special studies and practice is, or is presumed to be, in a position to throw light on the diagnosis, prognosis or treatment of any obscure disease, the patient has an inalienable moral right to obtain the advantage of his knowledge in the usual professional way, and the ethics of the profession require that he should give the attending medical practitioner, if duly qualified to practise his profession, the benefit of his experience, if asked to do so, irrespective of any difference

in their respective modes of practice.

The intolerant orthodox majority of the profession are

unwilling or afraid to meet us in the only arena in which scientific matters can be fought out—viz., full and free discussion. To avoid that they expel or exclude us from medical societies, one of whose chief raisons d'être ought to be the free ventilation and consideration of all that pertains to the improvement of therapeutics and the progress of medical science. They assume the right to attack us, and distort and misrepresent our doctrines and practice in their periodicals, but deny us our indefeasible right to reply or to correct erroneous misstatements. They even refuse to receive advertisements of our works in which the homeopathic doctrine is correctly set forth. They pretend to consider us so bad as to be unworthy of all professional intercourse, though the only thing they can allege against us is that we have examined and found useful a mode of treatment which they will not examine, but condemn untried. In addition to this they call us charlatans, and the system we have proved to our satisfaction to be an advance on former systems "quackery," as if such names and abuse could advance their argument in the slightest degree, and must not rather show the utter weakness of their case. Appeals to our colleagues, to their sense of fairness, to their obligations as men of science, are all in vain. It remains to be seen whether the non-medical public, many of whom have tested on themselves and their families the advantages of homocopathy, will approve of this paltry persecution by one set of medical men of another. their equals in professional qualifications and status, and their superiors in the scientific spirit which leads to careful and unprejudiced examination of new doctrines and systems enounced by earnest and scientific men-like Hahnemannand to the adoption of these doctrines and systems, if they commend themselves to their minds and prove useful when put to the test—which, in short, impels them to act on the maxim of no mean authority in another field-"prove all things, hold fast that which is good."

# INFINITESIMAL DOSES.

The following letter was addressed a short time back to the Editor of the *Spectator*, but was not inserted in that journal. The writer wishes to acknowledge his indebtedness for his facts to Dr. C. H. Blackley, of Manchester (see *Homaopathic Review*, October, 1882, p. 604):—

" To the Editor of the Spectator.

"Sir,-In your extremely interesting article on 'The Public Confidence in Doctors' you speak of 'demonstrable absurdities like the theory, now nearly given up, of infinitesimal doses.' However true it may be that the theory of infinitesimal doses is now nearly given up, it would seem as if the practice of using them was only just being adopted by the profession. The new British Pharmacopæia gives directions for a preparation of atropia discs, each containing 1-5000th grain of the alkaloid; and a favourite lotion of corrosive sublimate in ophthalmic hospitals contains one part of the salt to 50,000 parts of water. Of the power of infinitesimal quantities of various substances to affect the physiology of plants and animals, Darwin (Insectivorous Phints) has given abundant proof. One 20,000,000th of a grain of Phosphale of Ammonia he found sufficient to produce a distinct effect on the glands of Drosera Rotundifolia. Mr. Darwin says: 'When a dog stands a quarter of a mile to the leeward of a deer or other animal, and perceives its presence, the odorous particles produce some change in the olfactory nerves; yet these particles must be infinitely smaller than those of the Phosphate of Ammonia weighing the 20,000,000th of a grain.' Dr. Roberts, of Manchester, has shown that one part of diastase will change 40,000 times its weight of starch into grape sugar, and Dr. Blackley, of Manchester, in his work on Hay Fever, has proved that the 2,000,000th of a grain of pollen is sufficient to set up the first symptoms of that disease; whilst the 3,200,000,000th of a grain of diastase would be sufficient to neutralise the quantity of pollen taken into the system daily in the early stage of hay fever.

"As a matter of fact, we have no definite standard by which to measure doses, since there is at the bottom of all physiology and all drug action an unknown factor. A pound of metallic mercury is, in a sense, a large dose; but yet it may be swallowed without producing any other effect than the mechanical one of its own weight. A few grains of that same mercury finely divided and mixed with inert chalk is in the same sense a much smaller dose, but these few grains would suffice to salivate many people and loosen all their teeth.

"I am, Sir, yours, etc.
"John H. Clarke, M.D.

"15, St. George's Terrace, Gloucester Road, S.W.,
"October 26th."

### THE NORWICH CONGRESS.

### ON THE THERAPEUTICS OF CONSTIPATION.1

By ARTHUR CLIFTON, M.D., M.R.C.S. Eng.

Mr. President and Gentlemen,—I propose to submit for discussion and criticism "A few observations on constipation, and the medicinal treatment of some forms and manifestations of I shall omit all reference to those forms of constipation due to the presence of tumours, hernia, invagination or strangulation of the intestines, for whilst they are amenable to the curative action of drugs, they are so to only a very limited extent, and often require surgical operations. Those forms also of constipation that are owing to errors of diet and regimen--very important ones-but requiring, for the most part, simply a correction of such error for the cure, I shall omit, as it is needless to bring them before the notice of an assembly like this. After briefly defining the term "constipation," and as briefly touching on its pathology, I shall adduce some reasons which appear to me to justify an inquiry into the treatment of constipation by aperient medicines, and also according to "the totality of the symptoms." I shall further notice some of the difficulties attending the practice of therapeutics according to our method, and finally present a few clinical indications for a few remedies that, so far as I am aware, have but rarely been used by other homocopathic practitioners for certain forms of disease in which constipation is sometimes a prominent or characteristic symptom.

Definition of the term "Constipation."—By it I understand a condition where the alvine evacuations are either deficient in quantity, too infrequent, too dry and hard in substance, or one where they are passed with difficulty. Each of these manifestations will vary in degree in different persons, and in different diseases, as well as in comparative states of health. Such condition, moreover, must be regarded, for the most part, only as a symptom of various morbid states, and not as pathognomonic of one in particular; we must look upon it in the same light as we do diarrhœa, enuresis, dropsy, etc. With regard to its pathology, I shall only remark in passing that constipation appears to me to arise either from a perverted peristaltic action of the bowels of a reflex (or direct) character, a constitutional dyscrasia, an altered state of the mucous and other coats of the intestines, especially of the rectum, or from the presence of tumours or other foreign bodies in the abdominal cavity. At the same time, whatever may be its etiology, and however well defined and scientific a description may be formulated of it, I believe that in

<sup>&</sup>lt;sup>1</sup> Read before the British Homosopathic Congress, held at Norwich, September 25th, 1885.



our efforts to cure constipation we must ever fall back on the study of symptomatology for our therapeutic guide.

Reasons for the examination of the subject.—1. Mankind in all ages and in all quarters of the globe appear to have had a profound belief in the eliminative treatment of disease by means of diaphoretics, diuretics, and purgatives, and especially by the last. Men educated in the laws of "life, health, and disease," and accordingly known as "physicians," have shared this belief, and although it is not held by them to the extent that once it was, it is not renounced; purgatives are still had recourse to, in the preliminary as well as in the subsequent treatment of many diseases, by the majority of the profession; the drugs used may be less drastic by reason of their different character, or from being given in smaller quantities; the mixtures prescribed may be less complicated, but the action sought is still purgative. With the general community, not scientifically educated in matters relating to health and disease, the belief in the curative properties of purgatives still holds its ground; and although non-medical homoeopaths are sometimes wiser on this point than others, still amongst them there is ever and anon the inquiry and search for homosopathic medicines that shall act as aperients in such slight cases of indisposition as may appear to them not to require the aid of a physician; such cases, for instance, as are commonly called biliousness and indigestion, and those where the bowels are in a constipated condition. This demand is unfortunately often met, and the public are supplied by homocopathic chemists and others with Podophyllin, Berberine, etc., labelled as such, or other medicines in the form of tinctures or pilules, designated "Liver," "Antibilious," or "Aperient," their prime action being on the liver and to clear out the system. The result of this is injury to the patient and to the cause of homoeopathy, inasmuch as it encourages the belief in the value of purgatives, merely to open the bowels, and drugs for the liver, without regard to the appropriateness of such remedies for each particular manifestation of diseased condition. I am not, however, surprised at the persistent desire for, and belief by mankind in, the necessity for relieving a constipated state of the bowels, nor do I think that it will ever cease whilst men have the inner physical sensation that unlocking the said bowels will afford them relief, especially among those who have experienced the sense of comfort afforded by such means.

With such a widespread and continued belief in the need for aperient medicines in certain morbid states by so large a number within and without the profession, and this after the many years of scientific inquiry and observation of the laws of physiology and disease, it appears to me that the treatment needful



for this state is well worth considering once more, and that if aperients are not required, that we should, by homoeopathically chosen remedies, endeavour to meet more perfectly, and in a quicker manner than we have hitherto done, those conditions where constipation is a prominent symptom.

2. It is, I think, generally assumed by homoeopaths that when an aperient medicine has been given for a constipated state of the bowels, and has produced an evacuation, a reaction to constipation ensues; this I admit. But it is further assumed that the secondary constipation is more obstinate and worse than the first, and absolutely requires a repetition of aperient medicine to relieve it; this I do not admit, but know to the contrary, and am sure that in many cases, if the reactionary state is let alone, the bowels will return to their normal condition, and more readily so than the primary constipation would have done without the aperient medicine, inasmuch as by the evacuation of the bowels the patient is often relieved, and is able to take and to digest more food, both helping to a restoration of the peristaltic action of the intestines.

We all know that after diarrhoea there is a similar reaction, which if let alone passes off in a day or two; and if we turn to the recorded pathogeneses of such well-proved drugs as are direct irritants of the gastro-intestinal canal, whether they be Alos, Iris, Phytolacca, or others, we find but few records of a constipated state continuing for long, and its deviation is not at all to be compared with the diarrhoea symptoms attributed to them.

3. As homeopathic practitioners, the totality of the symptoms in any given case of disease is our guide for the selection of a drug for the cure thereof; there are, however, greater and lesser symptoms, both of drug and disease; each requires to be estimated, according to its degree of importance, those demanding our chief consideration being what we call "characteristic." Constipation, like diarrhoa, is a very common and very prominent symptom, both in its early manifestations and in its persistence, and may or may not be characteristic of any given case; the question therefore arises whether we do not too often disregard it as such, take no more account of it than we do of other symptoms, or whether on the other hand we overestimate its importance, and adapt our medicines in either material or attenuated doses, with especial reference to that symptom above others, to the case under treatment, and so relieve the bowels earlier than if we did not make it "characteristic;" whether under the latter circumstances we are not departing from the "totality of symptoms," and virtually employing aperients, although our remedies may not produce liquid evacuations.

- 4. It must not be supposed from what I have said that I advocate the employment of aperients as such; on the contrary, I am decidedly opposed to their use, just as much as I am to the use of Podophyllin, Bryonia, Nux, and similar medicines, when used simply to produce an action on the bowels—that is to say without there being a close correspondence between the symptoms produced by the drug and those characterising the disease, a method which I have occasionally adopted, and one which I believe is still resorted to sometimes by other homosopathic practitioners. Whilst, however, I deprecate such treatment on theoretical and physiological grounds, and still more from observation of the results of such measures, I am nevertheless strongly of opinion that in very many cases we do not make the constipation symptom anything like sufficiently "characteristic" (excepting, of course, in most of the acute forms of disease, where it is generally a reparative or compensating symptom); and I believe that if we did so much oftener than we do, at the same time giving drugs corresponding to the totality of the symptoms, and in sufficient doses to relieve the bowels without purging, we should cure many cases much more quickly than we do.
- 5. Whatever view we take of these points we, nevertheless, are required to go to our *Materia Medica* to find a drug corresponding—(homosopathic)—to the state of disease we wish to cure, and there we see a mass of symptoms, many of doubtful origin, all of them badly arranged, without any hints as to the order of their recurrence, the primary, secondary, or alternative action, without reference to the dose which produced them, though these are all points of importance when endeavouring to obtain the similimum.
- 6. A great improvement in the Materia Medica is, however, being now attempted by our American brethren, and by some of our number in this country, but if the work should be as long in completion as has been the most recent work on Pharmacology, Therapeutics, and Materia Medica, by one of the most eminent men belonging to the old school in this country, The Cyclopadia of Pathogenesy may be of service to our successors, but not to many of us, for the work I have referred to has occupied fifteen years in its production, and after all is infinitely inferior both in conception and practical results to that done in the same direction by that eminent truth-seeker and scientific observer of our own school, Dr. Richard Hughes.

(To be continued.)

# SOCIETIES' MEETINGS.

### BRITISH HOMEOPATHIC SOCIETY.

At the meeting of the British Homoeopathic Society, held on Thursday, December 3rd, 1885, Dr. Roth, vice-president, in the chair, Dr. Renner, of London, read a paper On the Theory of Vaccination.

Dr. Renner said that among the common people of many countries it has been for ages a tradition that persons who had contracted cow-pox were safe from small-pox infection; but it was Jenner who first put this upon a practical basis. He described the well-known naked eye appearances that follow inoculation with vaccine virus, and the general disturbance of the system. He spoke also of the microscopic appearances, and seemed to regard a special micrococcus as being the most essential part of the virus. When the virus was introduced into the veins a general eruption followed. The same occurred with sheep: but in the cow no eruption followed. Afterwards, however, the animal could not be vaccinated, showing that the intra-venous inoculation had taken effect. The blood of the newly vaccinated contained the infection. When taken by the mouth violent effects had followed, including eruption of vesicles. The exact part played by organisms in the disease had not been made out. Besides the cow, the horse, sheep, and pig each has a pox special to itself, and each could have that of the others. The time during which immunity lasts had not been definitely made out. scars were not much to go by; they were often the result of sloughing, which is no necessary part of the vaccine process. Dr. Renner discussed the relation of cow-pox to small-pox, and he said that neither "identity" nor "similarity" expressed the He thought that vaccinia (or, as he preferred to exact relation. call it, and more correctly, vaccina) was small-pox modified by passing through the cow. What the changes were was not known. The immunity afforded was as great as that afforded by an attack of small-pox. He mentioned as analogous the particular effects of medicines, as of Belladonna in scarlatina, and of bee-stings against subsequent bee-stings. He said that as we had no scientific basis on which to found our doctrines we were compelled to take the ground of statistics. He thought that Pasteur's experiments would throw light on the subject.

The President called upon Dr. Hughes to open the discussion. He asked as to the origin of vaccine. Jenner had said there was no such thing as spontaneous cow-pox, and he (Dr. Hughes) thought it inadmissible to take it from human variola. He thought the micrococci were rather concomitants than the cause of the disease, and mentioned that Virchow had found shoals of

comma bacilli in cases of arsenical poisoning. He thought we were not justified in making vaccination compulsory. LESLIE, of America, said he had just been in Vienna, and Professor Neumann had lectured on vaccination; the latter did not believe syphilis transmissible, and used syphilitic children as vaccinifers without bad results. In America calf-lymph was generally used. Dr. WYLD explained how he came to introduce calf-lymph inoculation into this country, in order to avoid infection with syphilis, as animals are insusceptible to that disease. Jenner's vaccine had deteriorated. Accidents happened in consequence of too many places being inoculated on the same person; two were quite enough. The question whether vaccinia and small-pox were the same was a very difficult one. It was very difficult to inoculate a heifer with small-pox, but quite easy with vaccine. Dr. EDWARD BLAKE mentioned instances in which bad results had followed, traceable to defective drainage; and one case where, after atropism had been caused through excessive use of Belladonna for a spinal complaint, erysipelas followed vaccination and a cheloid formed on the scar. Dr. Yeldham was in favour of compulsion. He remembered the time when disfigurement from small-pox was much more common than it is now. Vaccination in advanced life was often attended with bad He thought re-vaccination should be enforced. had never been re-vaccinated. Dr. Hughes said we ought to enforce re-vaccination if we enforced vaccination at all, but nobody proposed that. Dr. Goldsbrough had vaccinated very many cases without any bad results. He did not think systemic reaction was necessary to afford security. In many of his cases. though the appearances were characteristic, there was scarcely any disturbance of the general health at all. Dr. JAGIELSKI had been vaccinated four times; the last time, very successfully, by Dr. Renner. He believed in compulsion. Dr. Dudgeon referred to cases of accident with vaccination. He thought that whatever small-pox and cow-pox were originally, they must be different now. He mentioned the case of a lady nursing her servant in small-pox, who was vaccinated five or six days after exposure to the infection. Vaccinia ran its course up to the eighth day, when the characteristic vesicle appeared. On that day she had backache and shiverings, and the next day came out with the eruption of small-pox. The vaccine vesicle died immediately, and then the small-pox, after forming vesicles, also died away at once. Clearly there were two diseases here modifying each other. He did not think the micrococcus had much to do with the disease. Dr. Clarke did not think we were much nearer a true theory of vaccination, or that we were likely to be. There is an unknown quantity in all diseases. Pasteur's experiments were too unscientific to explain anything, and he did not expect the theory would gain anything from them. He referred to

grave accidents from vaccination, and said he did not think compulsion justified. Dr. Blackley thought the micrococci were an important factor, and that experiments had shown this. He was strongly in favour of compulsion. If vaccination was dangerous to old people, small-pox was more so. The President referred to the great diminution in the number of those blind from small-pox since vaccination was made compulsory. Dr. Renner said in reply that there was great difficulty in answering the question of the origin of vaccine. That he used came from a heifer successfully inoculated with small-pox. Compulsion he considered was a question not for medical men at all, but for the Government.

# FROM ABROAD.

(ABSTRACTS AND EXTRACTS.)

# GERMANY. BISMUTH.

In the Archiv. fur exp. Pathol. u. Pharmak. xx, p. 40, there is an article by Dr. Steinfeld on the effects of bismuth. He gives the histories of numerous poisonings of frogs, both brown and green, hens, mice, rats, rabbits, cats, and dogs. These experiments, which, whatever differences of effects they may have developed, terminated monotonously in death, are of small interest to the inquiring therapeutist, but the effects incidentally described of the external use of magist. Bismuthi in surgical cases are more interesting to us than assuredly they were to the unfortunate patients, Kockerl and Peterson3. On cases of operation to which this substance was applied as a dressing, there appeared acute stomatitis, with great swelling of gums, tongue, and fauces, looseness of teeth, and black discoloration of the edges of gums; also intestinal catarrh, with colic and diarrhoea, and finally desquamative nephritis with albumen and granular cylinders in urine, with symptoms of deranged digestion, nausea, and vomiting. In one case where death ensued fifteen days after the operation, there were found strong black pigmentations throughout the whole intestinal tract, especially in the large intestines. They also displayed numerous cieatrices and some losses of mucous membrane.

In these cases the poisoning was effected by absorption of the bismuth by the wounded surface.

<sup>1</sup> Volkmann's Klin. Vort., No. 224.

<sup>&</sup>lt;sup>2</sup> Deutsche med. Wochenschrift, 1888, No. 25, p. 367.



### ERGOTISM.

An epidemic of ergotism that prevailed in Hesse in 1879 and 1880 furnished twenty-eight cases of mental disease to the Marburg Lunatic Asylum. All these cases and many others observed outside the asylum showed symptoms of affection of the posterior columns of the spinal cord. Four of these patients having died, the post-mortem examination showed pathological changes similar to those met with in most cases of tabes dorsalis. Our own pathogenetic records of secale exhibit many of the phenomena of tabes; but it is interesting and important to find the anatomical corroboration of the disease indicated by these symptoms. Melancholia, anxiety, idiocy, and mania are also among the homosopathic provings of this drug. The account of the Marburg cases is contained in the 11th Vol. of Siemens' Archiv. für Psychiatrie (Allq. H. Ztg., exi. 134).

### A NEW REMEDY FOR GONORRHŒA SECUNDARIA.

THE treatment of gonorrhoa, whether by allopathic local remedies or by specific internal medicines, is not always so satisfactory as could be wished. The discovery of a micrococcus in connection with the disease gave a great stimulus to its merely local treatment, and lately elevated a weak solution of corrosive sublimate into the position of an infallible microbe-killer, and therefore specific for gonorrhoa. But its infallibility has not been corroborated by large experience, and we still meet with cases which resist all accredited external and internal remedies, and which wander about uncured from one doctor to another, or, giving up all hope of a cure, resign themselves to bear their misfortune with equanimity. In a recent number of the Allg. Hom. Zeitung Haupt relates a most inveterate and obstinate case which was eventually cured by what we may call a "fluke," that is, by a medicine given for quite another malady. The patient, twenty-seven years old, had already suffered from three attacks of the disease, which was readily cured by allopathic treatment, but a fourth attack, in 1879, proved more obstinate. This time the disease was not of a very acute character from the commencement, as there was but little pain, and the discharge was moderate. He first took Grimault's matico capsules, which apparently contain copaiba, as they caused a violent itching, burning eczema, first on the face, then on the hands, and finally all over the body, exactly resembling an eruption which had previously occurred when he took copaiba. He was next treated by a physician with purgatives and injections of five different sorts without benefit. He then consulted a homocopathic physician, who gave him Merc.-Sol., Hepar, Thuja, and Sulphur, with injections of acetate of zinc, sulphate of zinc,

acetate of lead, and carbolic acid, but all in vain. He next applied to Haupt, who on examination found the orifice of the urethra somewhat swollen and red, and some tenderness on pressure of the fossa navicularis. The discharge was scanty, and under the microscope showed the characteristic micrococci. The medicines given were Ac.-Nit., Phos., Nat.-Mur., Caps., Nux Vom., Petrol., Hydrast., Cann., Ac.-Phos., and Sulph. and Thujs in Jenichen's dilutions. Injections of astringent Hungarian wine were also used. At last Schüssler's remedies, Ferr.-Phos., Kali Sulph., and Kali Phos. were given, all without result. After four months of this treatment the patient put himself under the care of a Berlin specialist, who laughed at the homosopathic treatment, and promised a speedy cure, but after four weeks of treatment by means of medicated bougies, as no effect was apparent, and the treatment was very painful and "frightfully expensive," he returned to Haupt, and asked what he was to do. Haupt told him that sometimes the disease ceased spontaneously when all treatment was abandoned. tried this no treatment for two months, and then put himself in the hands of a celebrated Vienna specialist, but without benefit. When travelling home he got a severe chill, which caused a severe attack of muscular rheumatism in the back and left shoulder. An allopathic physician cured his rheumatism, but could do nothing for his gonorrhosa, though he tried Cubebs, Forr.-Acet., and injections of alum. In May of the following year he had a relapse of his rheumatism, which led him to go to a celebrated water-cure establishment, where in eight weeks he lost his rheumatism, but the gonorrhosa remained uncured. In August he put himself under the care of the veteran Ricord, of Paris, who prescribed Acid. Tannicum internally and in injections, but without any good result. He then consulted another Vienna professor, who plied him with copaiba and injections of Arg.-Nit. The only effect of this was to bring back the troublesome eczema. He now made up his mind that his malady was incurable, and would do nothing more for it. When he had completed the third year of his gonorrhoea he came to Haupt to be treated for a severe spasmodic cough, the fits of which resembled whooping-cough. At this time the gonorrhea was still present, and was very much aggravated if he drank lager-beer or white wine. Haupt prescribed for the cough Naphthalin 3, one grain three times a day. Eight days thereafter he joyfully announced that his gonorrhosa was completely cured. He had not even the slightest trace of it after the ninth dose of Naphth. His cough, too, was very much improved, and after another week of the medicine, taken twice a day, the cough was completely gone; and thus he was cured of his tedious gonorrhosa, as it were, by pure accident. Haupt could not at the time feel sure that the action of Naphth. in this case was homosopathic, but in 1884 an article by Dr. Schwarz in the Zeitsch. f. Klin. Med., No. 50, supplied the evidence needed to establish this as a homosopathic cure. It is there stated that in many cases the Naphthalin had to be left off, as it caused "ischuria and very disagreeable pains during micturition," which at once subsided when the drug was discontinued.—Allg. Hom. Zeit., exi., pp. 122 and 131.

#### AMERICA.

### HAY FEVER CURED BY NAPHTHALIN.

DB. E. LIPPINCOTT, hearing that a sufferer from hay fever was always cured when he went into a manufactory where naphtha was much used, acted on the hint, and succeeded in curing many cases with Naphthalin 1x. In one case Ars.-Alb., Ars.-Iod., Grin., Rob. had been before used in vain. Dr. L. has also found Naphthalin useful in some forms of asthma. He had never given it higher than the 3x. There are no provings.—Investigator, June.

 $\mathbf{W}$ . C. D., Oakfield, Wis., writes:—

"I have a case of hay fever here in which Naphthalin 2x trit. did a splendid thing for me. A lady who has been troubled for the last eight years had found no relief. I gave her five powders, and she came in cured so far—something different from what she used to do—that she now sleeps all night and feels splendidly."—Investigator, August.

#### VIVISECTION.

In an interesting article on the Consideration of Magnetic Influences, Dr. Ad. Fullger has the following:—

"We may remark, in parenthesis, that vivisection is not necessary for us, as the proving of drugs on healthy persons gives us much more correct and comprehensive conclusions on which to base the application of our remedies. This is shown by the expressions of physiologists themselves. Professor Herman says: 'Physiological experiments are in this connection (experiments with electricity or galvanism) in the highest degree uncertain; the usual methods employed to produce irritation give partly no result at all, and partly they are not sufficiently localised to base positive conclusions upon, by reason of the numerous ramifications of the nerves, which must cause unavoidable deviations in the electrical current.' He makes these remarks about experiments on animals whose brain and spinal cord have been laid bare and treated with a current of electricity. Of other differently-executed experiments Professor Ludwig says :-'Instead of an exact dissection and irritation, the much cruder experiment is here employed of injuring and attacking the finest and most complicated structure (the brain) by comparatively coarse means-

analogous to an attempt to take a watch spart by a pistol-shot.' These experiments are, therefore, not entitled to the name 'scientific.' For us they have not the least practical value—nor for any one else."

# FOOD PREPARATION. AMERICAN BREAKFAST CEREALS.

We can testify to the excellent quality of the different foods prepared by the Cereals Manufacturing Company as articles of diet both for the well and the sick. Of all kinds of food there is nothing so wholesome as porridge of one kind or another taken with milk, and the sturdiness of the ancient Roman and of the modern Scot testifies to its sterling qualities. But all Saxon stomachs are not equal to the digestion of Scotch oatmeal, and all London cooks are not equal to the making of porridge. If there are any of our readers suffering from these difficulties, we recommend them to try the "A. B. C. white oats"— "A. B. C." being the short for "American Breakfast Cereals," taken from the initial letters, and having nothing to do with the alphabet, as some persons suppose. The A. B. C. "white wheat" and "barley food" are equally good, and are preferred by some to the oats. "Cereal milk" and "cereal cream" are other preparations for infants and invalids of proved These preparations are subjected to a process before exportation which renders them more easy of digestion and more easy to cook than ordinary meal; it also has a preservative action, and makes them keep for an indefinite time. The grain from which they are prepared is selected with the greatest care. We may add that puddings, fritters, and many other dishes besides porridge and invalids' foods, may be made of the cereals. Mr. B. Lampe, 44, Great Tower Street, E.C., is the London agent of the company, and all particulars may be obtained from him.

# REVIEWS OF BOOKS.

# SMALL-POX AND ITS PREVENTION.1

This pamphlet is No. 2 of the Montreal Tracts of Homocopathy, which are being issued by Dr. Nichol. The subject of this number was determined by an outbreak of small-pox in Montreal. This disease appears to be peculiarly frequent and fatal in the city of Montreal, for in September last the enormous number of 830 people died from this disease out of a population of 160,000. The essay consists of a fairly good account of the affection, and of a panegyric upon vaccination with calf lymph.

<sup>1</sup> Small-pox and its Prevention. By Thomas Nichol, M.D. Montreal. 1885.



Its free circulation among the profession and the public would be of great benefit. Considering the frequency with which we allow our febrile patients to allay their thirst with fluids containing lemon-juice, we note with surprise, on page 45, that "as lemonade antidotes most homosopathic remedies, it should never be allowed."

### EPITHELIOMA OF THE MOUTH.1

This is really a short essay on epithelioma in general, and that of the mouth in particular. It consists of ninety-four pages of large print with wide margins, to which fourteen pages of index are added; where the matter begins is called page 12, seven of the preceding being blank; four blank pages follow

the index. Behold how books are made!

A few pages are devoted to the epithelium of the mouth, and to the author's views on the origin of epithelioma therefrom. The forms in which epithelioma of the mouth occurs, with the diagnosis and treatment, are briefly but well described. The writer is one of those who consider epithelioma to be, in its first stages, a purely local disorder, and not the outgrowth of a constitutional condition; he therefore doubts the necessary inheritance and transmission of the disease. In these views he is supported by recent pathological research, by the results of early removal of the neoplasm, and by the latest statistical investigations on the subject, which have thrown much doubt on the importance of the occurrence of cancer in the family history of the individual.

These elaborated notes are presented as an admirably got-up book; but the text fairly bristles with what the writer probably would call "illy" spelled words: "effected parts" are constantly written of where "affected" are meant, and "practice"

is used for "practise."

<sup>1</sup> Epithelioma of the Mouth. By H. J. Ostrom, M.D. New York: A. L. Chatterton Co. 1885.

# PROVINGS AND POISONINGS.

#### CONIUM.

THE following appeared in the Lancet of July 25:-

"Poisoning by 'Extract of Conium."

"An inquiry was held by Dr. Danford Thomas on July 16th, at the Ossington Coffee Tavern, Paradise Street, Marylebone, into the circumstances attending the death of Percy Wallace Smith, aged eight months. With the exception of irritability

from teething the deceased was in good health at the time the fatal dose was administered. On July 12th Mr. Delamark Freeman was sent for, and he being away from home, Mr. O'Brien attended the case for him. The latter gentleman advised that the gums should be lanced, but the parents of the infant declined to allow it. To allay the fretfulness Mr. O'Brien ordered a mixture containing one drachm of extract of conium, one drachm of bromide of potassium, and an ounce and a half of chloroform water, one tablespoonful to be given every four hours until sleep was induced. The prescription was taken to a chemist, who, recognising the unusual dose for so young a patient, contented himself with cautioning the father against giving too much of the mixture, remarking at the time that 'no doubt the doctor meant a teaspoonful, and not a tablespoonful.' Accordingly a drachm of the mixture was given at eight o'clock p.m. The effect soon became manifest, and by half-past eleven the symptoms were so alarming that Mr. Freeman was hastily summoned. On his arrival he found the lower extremities completely paralysed, occasional twitchings of the arms and head, but no decided convulsion, marked dilatation of the pupils, lividity of the face, and diaphragmatic breathing. At that period he appears to have recognised the hopelessness of the case. Mustard poultices were applied, and attempts made to induce vomiting, but without effect. Death occurred at three a.m. on the 13th, seven hours after the medicine was taken. There was no vomiting. At the inquest Mr. O'Brien admitted that he had made two mistakes in the prescription: first, in writing a tablespoonful instead of a teaspoonful for a dose; secondly, in ordering the extract of conium instead of the succus. He could in no way account for this. In his opinion death was due to asphyxia from idiopathic convulsions, and not from the action of the drug. He quoted from the writings of Harley and Farquharson to show that the extract is comparatively inert and totally unreliable. Mr. Pepper, who conducted the post-mortem examination, and analysed the mixture and contents of the stomach, deposed that the body was well nourished and showed no traces of organic disease. The organs generally were much The brain presented marked increase of serous congested. fluid in the ventricles and beneath the arachnoid. membranes of the spinal cord were strongly injected. right side of the heart was distended with semi-coagulated blood. The bases of the lungs were gorged with blood, and the surface marbled with patches of congestion, collapse, and acute emphysema. The surface of the liver presented numerous groups of punctate extravasations. The bladder was empty. The alimentary canal was free from all signs of irritation. In the stomach were about eight ounces of thick greyish-yellow

pultaceous matter, consisting, apparently, in chief part of altered milk. There was no noticeable odour beyond the ordinary sour smell of gastric contents. On adding some liquor potassæ, and boiling, however, a strong smell like that of mice was developed. An ethereal extract yielded on evaporation green oily drops, consisting of vegetable colouring matter and the alkaloid conia. The latter gave, with hydrochloric acid, an abundance of acicular and stellate crystals. Several other tests furnished affirmative results. Mr. Pepper, whilst admitting that the extract of conium was of uncertain composition, and therefore untrustworthy in its administration, and, further, that a much larger quantity than the official dose was required to produce the characteristic effects, could but conclude from the evidence tendered by Mr. Freeman that the actual cause of death was asphyxia from paralysis of the respiratory muscles. The maximum dose for a child eight months old would be about one-twelfth that for an adult; consequently the deceased took ten times the full quantity ordered by the Pharmacopœia. The fact that the stomach contained a considerable quantity of food explains the somewhat protracted course of the symptoms, whilst the absence of vomiting conduced to the fatal issue. The experiments of Dr. J. Harley proved that all the preparations of conium, except the succus, as a rule, contained much less of the active principle than was generally supposed, or, indeed, was assumed by the official pharmacists. Conia is a liquid volatile alkaloid; so, apart from the fact that the amount varies largely in different specimens of hemlock, it will be seen that the degree of heat and the period of its application must largely influence the composition of the extract as regards its essential constituent. It is high time that the Pharmacopæia was purged of such therapeutic agents. The jury returned the following verdict: 'That deceased died from the mortal effects of asphyxia when suffering from an overdose of hemlock administered as extract of conium in a mixture prescribed for the deceased by Dr. O'Brien; and the jurors are further of opinion that the said medical man should be severely cautioned as to his negligence in carelessly writing the prescription in question; and they further consider that the chemist when he discovered the error should have refused to have dispensed the medicine (when he believed it contained a dangerous dose) before he had communicated with the prescriber.' We believe that the above is the first recorded case in which death has ensued in the human subject from an overdose of any of the authorised preparations of conium."

#### APIS.

WE take the following extremely interesting proving of Apis from the British Bes Journal (sent to us by an unknown friend). It was taken originally from the American Bes Journal

### "MY EXPERIENCE WITH BEE-POISON.

"In 1839 I put two colonies of bees in an attic closet, but I made no experiments of any kind with them; they were simply looked at and admired. In 1859 I fairly began my apiarian career, and I soon found that to experiment much with bees meant to get many stings; at first these were not only quite painful, but caused severe swellings. I dreaded to be stung the latter part of the week, for often one eye would close, and the other nearly so, and to preach in such a condition was by no means a pleasure. If stung on the hand my whole arm would swell so rapidly that if my coat was not seasonably taken off it had to be ripped off. In short, I was a regular martyr to beepoison.

"My second year's experience was much more favourable, and in the course of a few years I became almost bee-proof. In the pressure of business, and my zeal for studying the habits of the bee, I generally preferred to be stung occasionally than to lose time by wearing a bee-hat. The pain of a sting was seldom very severe, and not often caused much swelling. My experience was the same with that of most bee-keepers who have persevered in spite of stings, until at last their systems become accustomed to the poison.

"A few facts out of many that might be given: I once agreed to help a farmer to move a hive to a new location. He assured me that the bottom board was securely fastened. It fell off before we had got more than a few steps with our load—covered with bees, some of which were crushed—and the air at once was filled with the enraged insects. The farmer dropped his side of the hive and ran away; it fell against me, but I held on until I lowered it to the ground, and then made the best of my way into Perhaps a hundred or more stings were pulled out of my face and head; and yet in a few hours one could hardly notice that I had been stung at all. When visiting that great man, Dr. G. P. Kirtland, of Cleveland, Ohio, he wished me to examine with him a colony of bastard (hybrid) bees. The doctor was armed with bee-hat and gloves-both of which I declined to use. We quieted them pretty well with smoke, when he began to discuss some point in bee-culture with his usual animation. Soon his gesticulating hand was doing quite a business, the bees became furious, and paid all their respects to me; and how many stings were pulled out of my face and head I cannot tell. As soon as this extracting work was over, I said, 'Doctor Kirtland, I protest against all eloquence in the vicinity of beehives, especially when you are clad in proof armour and I have none!' Although ever so well stung the pain was soon over, and in a short time no visible proof remained that a bee had stung me.

"In 1874, after the death of my son, my health became so much

impaired that I sold all my bees. The next spring an entire change seemed to have come over me with respect to the beepoison. I first noticed it in extracting some stings with the poison sac attached for a friend who wished to procure the beepoison in a perfectly pure state. I had noticed at the beginning of each year's work among the bees that the poison affected me in various ways, and my wife would often have to awaken me when she heard me unconsciously moaning in my sleep. The night after pulling out these stings this moaning became so pronounced as to awaken the friends with whom I was staying, and alarmed them with the fear that I was dying. Intense dryness of the tongue and fauces, accompanied sometimes by what seemed to be an aggravated form of heartburn, smarting of the eyes, a heavy drooping sensation in the eyelids, breaking out fiery spots over various parts of my body, a disposition to almost tear the flesh of my cheeks, dreaming of the most excited kind, full of violent motion—these and many other symptoms were of frequent recurrence at the beginning of each bee-campaign.

"After getting the medicinal bee-poison, as before recited, the effect upon me was so severe that I became really alarmed, and earnestly sought to protect myself against any recurrence of such unpleasant symptoms. I soon found that this was next to impossible. To converse with those fresh from handling bees—nay, even to receive letters or postal cards from them—was to

be poisoned again.

"Ten years age, being at my old home in Greenfield, Mass., I engaged to visit my friend William W. Cary, of Coleraine, one Saturday afternoon, intending to preach to a congregation where for some years I had served as their pastor. was a charming one, and I was quite happy at the thought of meeting so many old friends. Mr. Cary had been handling bees all day, and was well charged of course with the bee-poison. Almost as soon as he had shaken hands with me, my eyes began to smart, my eyelids to feel heavy, and my face to itch. My spirits sank at once, and the thought of preaching and seeing my old friends caused me only anxiety; in short, the very bottom of all hopefulness seemed to drop out, as it were, in a few moments. Explaining my reasons, I sought other quarters, but the pleasure of my visit was essentially spoiled. Imagination! I hear some one saying. Does imagination cause burning eruptions on the body, constant roaring in the ears as though mear a waterfall, to say nothing of moaning in sleep, etc.?

"From 1875 to 1881 I dreaded the return of each bee-season.

My letters were all read by some member of my family that I might handle none from bee-keepers. I felt that, let my general health be what it might, I could do nothing more with bees.

While I could easily trace much of my suffering to the beepoison, I could not believe that it was the cause of the head

trouble from which I had suffered so much, for I was a frequent martyr to this many years before I kept bees. Now, had I given my experiences with the bee-poison from 1875 to 1881, I should have left the matter in such a shape as to prejudice many against having anything to do with bees. I should only have given the actual facts in my case, but for want of other facts not then duly weighed by me, my facts would have seemed to warrant in-

ferences just the opposite from the truth.

"In the spring of 1881, my health being more fully restored than for some years, it seemed to me almost an impossibility to keep longer away from the bees. A new thought suddenly occurred to me. Suppose a person after long use of tobacco or opium should give them up for some time-long enough for the effect they produce to pass away-and should then attempt to take the old, big dose, would he not be naturally alarmed at the result? May I not be mistaken then in supposing that any great change has taken place in my system as respects the effects of the bee-poison upon it? and may not my painful experiences of the last six years be accounted for in another way? So long as I kept bees and dealt so largely in queens, I was compelled each year to inoculate my system so fully with their poison, that however severe the ordeal at first, I soon became indifferent to it. Now, being under no such necessity, I stop short every time of full and repeated doses. Suppose that I take such doses again. With fear and trembling on the part of my family, but with scarcely any on my part, I determined to test the matter, for as even the presence of freshly extracted honey in the house was enough to bring on another attack, I felt that I must get out of the world before I could escape from this dreaded poison. I determined, therefore, to make full proof of my new theory. Without any beehat I helped my friends to extract their honey, all the time saying to the bees, 'Sting me as often as you please;' and as they were gentle Italians, I did not scruple by somewhat rough treatment to make them do much more than they naturally wished to in the way of stinging. From the very first I did not suffer nearly as much as I had done every year since I ceased to work with the bees, and little if any more than I had done every year when first handling them. In about a week I was again bee-proof, and launched out at once into a course of experiments (all in vain) to control if possible the impregnation of queens.

"However, I describe the delight I felt in handling again the moveable frames. In the apiary of a neighbour, Rev. McGregor, I fully proved that with small strips of foundation for guides, I could use my comb-guides, or guide-frames, and secure from Italian bees the same perfect worker-combs that I used to get with these guides from the black bees, thus realising a favourite

idea of one of our greatest bee-keepers, Doolittle, viz., getting

perfect worker-combs with the least use of foundation.

"While handling frame after frame of such combs, and feeling as much enthusiasm as I did in 1853, when I first saw that the bees would follow the triangular comb-guide, I exclaimed to the Rev. McGregor (apologising for the seeming play upon his name), 'I must make these words of Rob Roy in Scott's novel my own: "My foot is upon my native heath—and my name is McGregor.""—Rev. L. L. Langsteoth, Oxford, Ohio.

# GENERAL CORRESPONDENCE.

# INTERNATIONAL HOMEOPATHIC CONGRESS, 1886.

To the Editor of the Homeopathic World.

Monsieur et Honoré Confrère, —Comme nous avons déjà eu l'honneur de vous le rappeler, le Congrès international d'homœopathie tiendra sa prochaine Session en 1886, à Bruxelles; il aura lieu selon toute apparence la première semaine du mois d'Août; nous venons vous prier de bien vouloir ne pas le perdre de vue et de prévenir vos lecteurs que les mémoires et travaux destinés au Congrès devront nous parvenir au plus tard le

1er Mai prochain.

Nous engageons vivement les homosopathes à se mettre à l'œuvre, afin que le Congrès soit réellement profitable à la grande cause de l'homœopathie; le moment est favorable : les sciences médicales, physiologiques et biologiques s'occupent depuis quelque temps tout spécialement des infiniment petits; les expériences de pathologie se font aujourd'hui sur l'objectif du microscope en agissant sur des êtres infiniment petits au moyen de substances infinitésimales; l'homœopathie, nous semble-t-il, doit élever la voix, elle qui depuis Hahemann est précisément entrée dans ce domaine; la guérison et la prophylaxie des maladies virulentes et infectieuses, l'inoculation des virus atténués et modifiés par les cultures, les récentes études sur l'action des eaux minérales, la métalloscopie et la métallothérapie, tout prouve que les savants et les chercheurs se rapprochent de plus en plus des grands principes de notre doctrine; il nous semble que le moment du triomphe n'est plus éloigné, le vent souffle dans nos voiles; redoublons donc de courage et unissons tous nos efforts pour que le grand convent international de 1886 soit utile et fécond en heureux résultats.

De nombreux et récents travaux ont été publiés sur notre Matière médicale que de bons esprits s'efforcent de compléter et de réviser; le Congrès pourrait s'occuper utilement de cette

intéressante question.



Que chacun de nous apporte sa pierre à l'édifice, que ceux qui ont fait des observations et des découvertes utiles les communiquent au Congrès qui les discutera et les examinera de près.

Travaillons donc tous au succès du Congrès.

Recevez, Monsieur et honoré confrère, l'assurance de nos meilleurs sentiments de confraternité.

Le Comité provisoire du Congrès:

Dr. Martiny.

Dr. SCHEPENS.

Dr. CRIQUELION.

Dr. SEUTIN.

Bruxelles, le 2 Décembre, 1885.

# "THE NEW PROPAGANDA." To the Editor of the Homeopathic World.

Sir,—For several years past a few homoeopathic practitioners of position and influence in this country have thought that "so firmly established is the main doctrine of homeopathy, and so far has its auxiliary methods of dosage and administration of medicines succeeded in modifying the practice of the old school," that nothing more is required now than to allow it to quietly and silently work, without any active propagandism. believe that in time it will, unaided by such method, permeate the practice of the old school more than it has at present, and will, moreover, occupy its proper place as a system of therapeutics. They also assert that already it is in such a position that it "can neither be laughed at nor ignored;" and some of them go further, and say that there is but little difference in the practice of the two schools at the present time. Acting on these convictions, they have from time to time opposed, or only given a half-hearted support to, all attempts to disseminate homeopathy, save on a purely professional basis. From men holding such views of the present position of Homosopathy no other course could be reasonably expected. It is, however, open to question whether their visus are correct, and have been formed on sufficient evidence. So far as I can form an opinion on the matter I believe they are erroneous, containing only a shadow of truth; and certainly no evidence has been adduced in proof of their correctness—but the very contrary. It cannot be denied that nearly all the so-called "orthodox" medical journals refuse admission to any article tainted with the medical heresy; scarcely any of them will even admit an advertisement of a work on homeopathic therapeutics, and the medical societies, with but few exceptions, refuse admission to avowed homeopathic practitioners; and only a few consulting physicians or surgeons

will willingly meet a homosopath in consultation. Homosopathic practitioners in the provinces, although not exposed to the active persecution of former years, are yet for the most part professionally "boycotted;" and homeopathy is either "laughed at or ignored," just as suits the occasion; and although numbers of allopathic practitioners ever and anon use medicines hitherto only used homeopathically by members of our school, they do so empirically, purely by the "rule of thumb" method, as mere "tipe" in emergencies, without an attempt to understand or apply the therapeutic law of similars, the "main doctrine of homocopathy." All this is, I believe, well known by the general body of homosopathic practitioners, and who, I believe, would, if questioned, distinctly thereon say, "Aye." The few who would give a different reply are for the most part medical men engaged in fashionable practice, and who know but little of the middle and lower class of medical practice, especially in the provinces, and are not subject to the rebuffs or isolation of the country practitioner.

Holding as I do these views respecting the present state of allopathy and homocopathy, and the practitioners of both schools. and that many of our number who are in sympathy with me have, nevertheless, for the sake of peace and harmony, submitted their convictions to the "do-nothing policy" so often propounded by others, whose personal good feeling they have desired to maintain—with these convictions I hail with infinite delight the hint you have given in the December number of the Homeo-PATHIC WORLD of some meeting having been held to consider the question of forming or reviving a society for the further propagation of homosopathy. The fact of this little having been done shows that our men are not all dead, that a remnant remain who are neither mentally nor morally blind to the present sorry aspect of the position of homosopathy in this country, and who are moreover anxious to improve that position, if only some course of action can be agreed upon in furtherance thereof. Whether or not this "remnant" will be able to attract a sufficient number of adherents for fighting purposes. or whether there exists sufficient heroism, self-denying labour, enthusiasm on behalf of the cause, and if so, whether an agreement can be arrived at as to the abuses to be attacked, the principles and methods of warfare to be adopted; and whether they are moreover willing to subjugate some of their individual ideas or fads to a general mode of action, under some leader of tact, ability, judgment—if such a one can be found—are all points on which I am unable to speak. Unless, however, these several points of union can be attained to a great extent, new organisation, new machinery, will be of but little avail, and a guerilla warfare by those who see the corruption and decay that is creeping over our body will be by far the best for the present.

I am, however, reluctant to believe that we have arrived at that condition, but rather that there is sufficient enthusiasm, courage, good judgment amongst us to organise a society for carrying on the much-needed work. If, however, such is attempted, it will be needful, for arriving at a successful issue, that the members of such organisation shall set their faces like flints against "the arm-chair" policy of procrastination, professionalism, and laises faire of some, against the timidity of others who fear to offend the members of the old school or are afraid of losing their own professional dignity in such a warfare. For most assuredly these influences will all be brought to bear on any attempt to form a "new propaganda," especially containing the lay element, which I believe is essential to its success.

Personally, I have no desire for fighting from the love of it, nor any wish to emulate Don Quixote and run a tilt at windmills. I would much rather be at peace with all men, more especially in hearty union with all men believing in and practising homeopathy. I feel, however, that the non-aggressive, the "rest-and-be-thankful" policy pursued by us for many years, has been highly detrimental to our cause, and if continued will end in shame and ignominy. In a few short years many of us will have passed away, and unless we bestir ourselves at once it will be written of us as of thousands of others, "They were possessors of a great truth for the benefit of humanity; they fought for it in early life, but with increase of strength, position, and comfort, they preferred peace without progress, position without power, to fighting the battle out and winning new victories for truth; therefore, they shall be remembered no more."

In conclusion, I would suggest that all who are interested in the well-being of homeopathy, professional men or otherwise, whether they are in accord or not with the views here put forth, should ventilate them through the pages of the Homeopathic World; and, if a greater number of papers or letters thereon be sent than space will allow, that a meeting, to be composed of professional men and laymen, be called in the protected in the subject in all its expects.

metropolis to consider the subject in all its aspects.

Yours very truly,
A. C. CLIFTON.

Northampton.

# AMERICAN OBSTETRICAL SOCIETY.

To the Editor of the Homocopathic World.

SIR,—An association of medical practitioners was organised on October 28th, and incorporated under the laws of the State of New York as the *American Obstetrical Society*. It is the purpose of this society to engage in the study of the art and science of obstetrics in a systematic manner, with the hope of making its

practice more exact and satisfactory. With this object in view, it is deemed desirable to include within the membership every physician who is especially interested in the development of this department of medical practice. The society has already seventynine members, located in twenty-one States, with the following officers elected to serve until the annual meeting in June next:— President, George W. Winterburn, M.D., of New York; Vice-Presidents, Henry Minton, M.D., of Brooklyn, Prof. Sheldon Leavitt, M.D., of Chicago, Prof. Walter Wesselhoeft, M.D., of Cambridge, Mass.; Secretary, Everitt Hasbrouck, M.D., of Brooklyn; Treasurer, Clarence M. Conant, M.D., of Orange, N.J.

Meetings will be held as often as practicable, the first of which will be in New York on December 10th, and of which further notice will be issued at a later date. The annual meeting for 1886 will be held at Saratoga, in connection with the meeting of

the American Institute of Homocopathy.

The annual dues are two dollars for the first year (this includes the certificate of membership), and one dollar for each subsequent year. It is hoped that plans for an equitable dissemination of papers and discussions may be evolved which shall promote the largest benefits to the membership. The Transactions of the society, including all the papers and a stenographic report of the discussions, will, for the present, be printed in full in the Homosopathic Journal of Obstetrics.

A cordial invitation is extended to any one interested in the objects of the Society to communicate with the Secretary,

E. HASBROUCK,

253, Thirteenth Street, Brooklyn, N.Y.

November 3rd, 1885.

### MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Attfield (J.). Chemistry, General, Medical, and Pharmaceutical. 11th edition. (Van Veorst. 15s.)

Barnes (R.). Lectures on Obstetric Operations. 4th edition. (Churchill. 124. 6d.)

Beasley (H.). Pocket Formulary and Synopsis of the British and Foreign Pharmacoposiss. 11th edit. (Churchill.

6s. 6d.) Beaumetz (D.).

6s. 6d.)

Beaumetz (D.). Clinical Therapeutics.
Lectures in Practical Medicine, delivered in the Hospital of St. Antoine, Paris, comprising the Treatment of General Diseases, Nervous Diseases, and ef Fevers. Translated by E. P. Hurd. (Detroit, Mich. 20s.)

Fagge (C. H.). Principles and Practice of Medicine. 2 vols. (Churchill. 36s.)

Hydrophobla, its Nature and Symptoms, with Suggestions as to Preventive and Curative Treatment. (Stanford. 1s.)

Illustrations of Clinical Surgery. Fasciculus XVIII. By J. Hutchinson. (Churchill. 6s. 6d.)

James (P. J.). Guide to the New Pharmacoposia, 1885. 2nd edit. (Churchill. 2s. 6d.)
Lusk (W. T.). Science and Art of Midwifery. With numerous Illustrations. 3rd edition. (Lewis. 18s.)
Maclaran (P. H.). Atlas of Venereal Diseases. Fasciculus I. (Young, Edinburch.

Diseases. Fasciculus I. (Young, Edinburgh. 6a.)
Morris (H.). Surgical Diseases of the Kidney. With 40 Engravings and 6 Chromolithographs. (Cassell. 9s.)
Outline Figures for Recording Physical Diseases of Chidren. Disgnosis. (Young, Edinburgh. 1s.)
Owen (E.). Surgical Diseases of Chidren. Illustrated with 4 Chromolithographs and 85 Engravings. (Cassell. 9s.)
Pathology. Part I., General. Part II., Special. (CatechismSeries.) (Livingstone, Edinburgh. Each 2s. 6d.)
Pick (T. P.). Fractures and Dislocations. Illustrated with 93 Engravings. (Cassell. 8s. 6d.)
Ringer (S.). Handbook of Therapeutics. 11th Edition. (Lewis. 15s.)

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Roose (B.). Gout and its Relation to Diseases of the Liver and Kidneys. 2nd edition. (Lewis. 3s. ed.) Squire (B.). Manual of Diseases of the Skin. 3rd smaller edition. (Churchill.

Taylor (C. F.). Official Formulæ of American Hospitals collected and arranged.
(Philadelphia. 5a.)

Thomas (J). Complete Pronouncing Medical Dictionary, with an Appendix, together with the Necessary Directions for Writing Latin Prescriptions, etc. (Philadelphia. 25s.)

Transactions of the Ophthalmological Society of the United Kingdom. Vol. V. With Coloured Plates and Engravings. (Churchill. 12s. 6d.)

# SHORT NOTES. ANSWERS TO CORRESPONDENTS, ETC.

All literary matter, ports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester Road, South Kensington, S.W.

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

#### CORRESPONDENTS.

Communications received from Dr. Pemberton Dudley, Philadelphia; Dr. Dudgeon, London; Dr. Clifton, Northampton; Dr. Winterburn, New York; Dr. J. D. Hayward, Liverpool; Mr. Harris, London; Mr. James Milnes. The Provisional Brighouse; Secretaries of the Brussels Homoopathic Congress.

### BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische Zeitung.—Zoophilist. — Medical Advance.—Monthly Homœopathic Review. — Revue Homeopathique Belge.-Homöopatische Monatsblätter.-New York Medical Times.-Homeopathist. American St. Louis Periscope.—United States Medical Investigator .-Medical Advocate.—Clinique. Medical Visitor.—Chemist and Druggist. — American Observer.—The Homoopathic Obstetrics.—La of Reforma Medica.—The Hobart Mercury.—Calcutta Journal of Medicine. — The Guide. -L'Eclaireur.—Revista Argende Ciencios Médicas, Buenos Ayres.—Revista Hom. Catalana. — Hahnemannian Monthly.—Bibliothèque mœopathique.—Medical -Boerick and Tafel's Bulletin. -Medical Annals.--California Homosopath. — The Clinical Review.—Monthly Journal of Chemistry, Pharmacy, and Medicine.—Homosopathic Physician.—Philanthropist. — Some Fever Experience. By Charles Mohr, M.D.—A Treatise on the Breast. By H. J. Ostrom, M.D.—Cyclopedia of Pathogenesy. Part II.

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### THE

# HOMŒOPATHIC WORLD.

# FEBRUARY 1, 1886.

# FOR TRUTH AND JUSTICE.

THE powerful letter which we publish elsewhere from our correspondent "MEDICAL LIBERTY" touches the very heart of the question. It is not a mere dispute as between allopathy on the one side and homeopathy on the other side in which we are engaged; we are contending for truth-for science. The dominant section of the medical profession have decided that a certain point in science shall not be open to question. This is a sin of the gravest kind against science, and as scientific men we are not worthy of the name. if we sit down tamely and see science thus dishonoured. Truth in science must bear questioning to the uttermost, and no science that can be called science is at all afraid of it. This is not the case with the science of the timid folk who rule in the medical world. Their "science" is in such imminent danger from inconvenient questionings that they say it shall not be questioned. And they say more. They say it shall not be lawful for members of their body to have professional intercourse with persons who question their "science," or to give their assistance to any patient who may have such an unorthodox person for a medical attendant. And so, as usual, one sin leads to another; from sinning against science the dominant majority go on to sin against morals, against humanity, against justice. Our correspondent in his letter gives an example of this abominable conduct on the part of a representative of the orthodox party. An allopathic practitioner who had given up all hope of curing a Digitized by GOOGLE child he had been attending for diphtheria, not only refused to meet a homeopathist, living at a distance, whose advice the child's father wished to obtain, but gave the latter to understand that if he sought such advice, and any emergency arose, he (the practitioner) would give him no further assistance. This, we may state, was nothing more than the carrying out of the spirit of a boycotting by-law of the Royal College of Physicians. To stop the progress of medical science it is necessary for the authorities in the profession to form themselves into an inhuman boycotting conspiracy.

To the people we must take our cause, and place it on grounds of simple humanity and justice. The people may not be able to grasp a question of science—though they are much better able to do this than most medical men suppose—but every sane person can understand a simple question of justice, of right and wrong.

The response to our appeal of last month, and to the letter of our correspondent Dr. Clifton, has been most gratifying. A donation of £5 has been placed at the disposal of the Editor of this journal for the purposes of the Medical Reform League by Dr. Roth. Other subscriptions have been added to this. A central committee has been formed, and the duties of honorary treasurer and secretary have been temporarily undertaken by ourselves at the request of the other members of the committee. The following rules of the new Association have been approved and adopted:—

- 1. That an Association be formed to bring about Reform of Medical Policy and Medical Practice.
- 2. That the Association be called the MEDICAL REFORM LEAGUE.
- 3. That membership be open to all persons, lay and medical, of whatever creed in medicine, who are interested in Medical Reform.
- 4. That the annual subscription entitling to membership shall be not less than one shilling per annum; and that donations be invited.
- 5. That the immediate objects of the League be as follows:—

- (i) To enlighten the public and the profession on questions of medical doctrines, setting forth clearly the claims of different systems, and the removal of popular errors and popular prejudices regarding the same.
- (ii) To claim for the various systems and those who adopt them a fair consideration at the hands of those in authority in the profession, and equal rights from the Government of the country.
- (iii) To protest in the strongest way possible against all acts of inhumanity and injustice, the outcome of the present state of professional government and fashion, and to hold up all such offences to public scorn.

We think our correspondent "Medical Liberty" will be pleased to find how closely the ideas of the original promoters of the League correspond with his own. And the correspondence is the more remarkable as having been reached independently; for these rules were drawn up and approved almost as they now stand long before our correspondent's letter reached us.

As the motto of our League we take the words "FOR TRUTH AND JUSTICE." We might add the word "HUMANITY," but that is included in the other two. For humanity we all work; and all honourable medical men of whatever creed believe they do their best for humanity even when they pass by-laws whose aim is to stop investigation and to boycott honest men. But these are men of little faith and no light, however good their intentions. When TRUTH has free course and a fair field, and when JUSTICE is done to those who have not been afraid to bow before truth and to brave persecution, we have no fear of the result: and the gain will be the gain of science, the gain of humanity. Humanity has no higher interests than those embodied in the words of our motto. For TRUTH AND JUSTICE we strike; and to all we say, of whatever creed, "If there be any that executeth judgment, that seeketh the truth," let him cast in his lot with us, and join our crusade against the cruel tyranny born of ignorance and fear that now dominates the policy of the medical profession.

# NOTES.

### HYDROPHOBIA.

HYDROPHOBIA is still the talk of the day. M. Pasteur has concluded that his "cure" is not a cure, but only a "preventive." This is very safe. Nobody can possibly say that any person who has been bitten either by a real mad dog or a "supposed" mad dog (which is very different from a real one) is going to take hydrophobia. Hence all those who do not take it after inoculation are "successes," and in the cases of all those who do - and some have done already - an "explanation" is forthcoming. M. Pasteur only claims that his inoculation is effective for one year, for he told the representative of the Boston Herald that three little girls on whom he had operated could be bitten by any number of mad dogs for the next twelve months without fear of harm. In the meantime he is not certain if the bite of dogs that he has inoculated (or of his human subjects either, we suppose) and made, as he says, safe from the disease, cannot give the disease to other dogs and persons.

# REMEDIES FOR HYDROPHOBIA.—MERCURIAL FUMIGATION.

The vapour bath has been frequently spoken of as a remedy for hydrophobia. Mercurial salivation used to be also in great repute. It appears from a scrap of newspaper we have received from a correspondent—who does not know whence it came, but only that it is at least twenty years old—that a combination of the two may be very effectual. The extract reads as follows:—

"Hydrophobia is deserving of attention:—'When we were at Ahmednuggar in 1853-4 we were acquainted with Dr. David Wyllie, civil surgeon there. He told us of a case the day it happened, coming to see us directly after the patient was relieved. That morning a boy was brought into the hospital suffering from hydrophobia. Dr. Wyllie immediately had a pan of live charcoal brought and placed on the ground under a cane-bottomed chair. The boy was entirely undressed, placed on the chair, and enveloped in blankets. Then several grains of mercury (I forget how many) were thrown on the charcoal, and the former so impregnated the boy's body that in a quarter of an hour the saliva was pouring out of his mouth; the rigidity caused by the spasms ceased, and the poison came out of the boy. What happened after, whether the malady

ever recurred, I know not; but the boy lived, and so did all other cases treated by Dr. Wyllie when taken in time."

We give this for what it is worth.

### STRAMONIUM IN HYDROPHOBIA.

Stramonium is perhaps the most distinctly homoeopathic of all medicines to hydrophobia. The delirium of the drug is very like that of the disease; stramonium has produced the dread of water and the sensation of choking in the throat, both of which are so characteristic of hydrophobia. The following letter, which appeared in the *Morning Post*, December 15th, recounts an interesting experience with the drug:—

# A REMEDY FOR HYDROPHOBIA. To the Editor of the "Morning Post"

Sir,—It is well known that relief is obtained in cases of spasmodic asthma by inhaling the fumes of stramonium. When taken internally this drug produces a paroxysm of delirium and stupor which lasts for about twenty-four hours, and in India it was formerly often used by thieves in order to render travellers insensible whilst their baggage was being rifled. From what I am about to relate it will be seen that stramonium in the crude form of Datura, leaves or seeds, has strong claims to be regarded both as a phrophylactic, to prevent an attack of hydrophobia, and also as a cure if it has actually set in. I must further premise that many fatal cases of hydrophobia occur in India from the bite of rabid jackals, and persons so bitten are certain to be attacked. The jackal in its natural state flies from man and never attacks him; but under the influence of rabies it enters houses and bites every one it encounters. Such cases are common. I knew of one in which thirteen persons were bitten by one jackal; this was at Chinsocrah, in Bengal —all these people died. More recently five people were bitten in the lines of a native regiment at Berhampore, in the Madras Presidency—they all died of hydrophobia. While I was residing at Chettespore, in Ganjam, not far from the cantonment of Berhampore, I was one night awoke by my head servant, who came to tell me that three of the stablemen had been bitten by a mad jackal. He begged me to send at once for a Brahmin residing in Ganjam, about four miles off, who was known to have saved the lives of many persons attacked with hydrophobia. The Brahmin came at daylight and administered a green pulp which from its smell and its effects proclaimed itself as Datura; he warned us to expect the paroxysm of delirium and stupor during twenty-four hours, and enjoined abstinence from certain meats, but he would not divulge the nature of his remedy, nor was he willing to sell the secret. He assured me that the medicine was equally efficacious during an attack, or as a preventive taken beforehand, and it is certain that he was universally believed to have cured numerous cases. The persons bitten were in my service for a year at least, and none of them were attacked.

G. S. FORBES.

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### ALL MY EYE!

According to the Homoopathische Monatsbütter, Dr. Péczely, of Pesth, has discovered a new method of diagnosis which beats anything that has yet been offered to the admiration of the profession. By this method all we have to do is to look into the patient's eye, and we there see all his previous morbid history. We are not yet told how this is done, but the following are some instances related by an enthusiastic believer, Meyer, of Stuttgart, which promise great results for the future of diagnosis, and make us eager to know "how it is done." We may say that the eye diagnosis was made in every case by Meyer himself after only three weeks' study of the system.

1. He diagnosed an injury to the crown of the head in a young man, and true enough the patient confessed that he had got a wound on the top of his head two years previously

by a brick falling on it.

2. He diagnosed that a young man had had the itch, and lo! he confessed to having had that unpleasant affection

twelve years previously.

3. He diagnosed in another young man frequent attacks of itch. The victim confessed that for the last twelve years he could never get free of itch in spite of all sorts of treatment.

4. A woman of fifty-six years, the subject of asthma, revealed when her eyes were inspected a wound of the left foot, whereupon the woman admitted that years ago she had had a nasty ulcer on the left foot.

5. The eyes of a young man revealed an injury to the right foot. Two years previously he had dislocated an

ankle.

6. An American aged forty-two was examined, and the doctor declared that he had had something the matter on his left side. "By ——," something or other, he exclaimed, "you're right, for I have had repeated attacks of inflammation of the left lung."

7. The eye examination of another man about the same age showed that he had suffered from a disease which had been treated with large quantities of mercury, and he confessed to having undergone sixty mercurial inunctions.

The cases given do not seem to have been difficult to diagnose in the usual way, so the advantages of this new method do not appear to be very striking from them. But

in cases where the diagnosis might be difficult in the ordinary way it might prove of great utility. As M. Pasteur is getting shoals of patients for treatment by his method of vaccination who are supposed to have been bitten by mad dogs, it would be of manifest advantage if by looking into their eyes he could find out whether or not they had been bitten by really rabid dogs.

The title of Dr. Péczely's book is Entdeckungen auf dem Gebiete der Natur und der Heilkunde Anleitung zum Studium der Diagnose aus den Augen. We should mention that the author is a physician practising homeopathy at Pesth.

[While this is going through the press we have received Dr. Péczely's book, and learn from it that spots and marks on various parts of the iris reveal to him the maladies the patients have, or have had. If the work seems to us to be valuable we may hereafter give an extended notice of it. A superficial inspection of it makes us think that it is not undeserving of the title we have given to this short notice.]

# THE "NORTH AMERICAN JOURNAL OF HOMOTOPATHY."

We have received a number of the North American Journal of Homeopathy in its new form and under its new management, and we beg to tender our congratulations to its editors on the very creditable appearance they have made. Dr. Lilienthal will be rejoiced to find that he has worthy successors; and we do not think that anything will be lost by the monthly issue in place of the quarterly. We trust we shall meet Dr. Lilienthal from time to time as a contributor to the pages of the journal which he so long directed.

# A New Journal.

The way in which journals spring into life in America is astounding to our old country notions. Cleveland, Ohio, has now a monthly journal of medicine and surgery belonging to our school, bearing the name of the Clinical Review. Its editors have very good reasons to give why it should exist, and its first number promises well for its future. The best excuse for a journal's existence is its success. This we heartily wish to the Clinical Review, and this we have little doubt it will attain.

### "MEDICAL BOYCOTTING."

Dr. Dudgeon's article bearing the above title has been reprinted, and issued as a pamphlet by the MEDICAL REFORM LEAGUE, and may be obtained from the honorary secretary. For particulars see our advertising pages.

# ORIGINAL COMMUNICATIONS.

### SCIENTIFIC MEDICINE IN EXCELSIS.

By Dr. R. E. DUDGEON.

THE great, we may say the sole, object of the physician is, or ought to be, the prevention and cure of diseases. The first is the special object of hygiene, the last is more peculiarly the province of therapeutics. By therapeutics we generally understand the employment of medicines for the cure or amelioration of diseases. In order to do this successfully we require to know the powers of medicines, their mode of action on the human organism, and the manner in which they must be applied in order to bring back the disordered or diseased organism to health.

The study of the modes of action of medicines, pharmacology or pharmacodynamics, as it is called, has of late years engaged the attention of a very large number of physicians, and numerous articles in journals and books have been written on the subject. Unless this study of drug-action has effected a proportional improvement in the drug-treatment of disease, it must be useless or only of purely scientific

interest.

Dr. Lauder Brunton's great work, or perhaps I should say big book, which he calls A Text Book of Pharmacology, Therapeutics and Materia Medica, contains a resumé of all or most of the work that has been contributed by himself and others of the dominant school to the knowledge of the action of drugs and their application in disease. Though indeed a "big book" it does not seem to have proved a "great evil," in a pecuniary point of view at all events, for though it has only been published a few months a second edition has already been called for. I do not propose to give a review of it here, but only to examine it in order to see if it fulfils the expectations it raises as regards its utility for the purpose it aims at, viz., to help the practitioner to cure disease better than heretofore. The portions of the book which interest one in this connection are those that treat of the intrinsic or absolute power of drugs upon the living healthy organism—pharmacology—and those that concern the application of drugs for remedial purposes in diseasetherapeutics. I should mention that Dr. Brunton divides therapeutics into empirical and rational. He says: "By empirical we mean that drugs are tried haphazard, or with little knowledge of their action, in some cases, and, being found successful, are again administered in other cases which seem to be similar." He mentions the treatment of ague by quinine as an example. "Rational therapeutics consists in the administration of a drug because we know the pathological conditions occurring in the disease, and know also that the pharmacological action of the drug is such as to render it probable that it will remove or counteract these conditions." His example of this is the use of nitrite of amyl in angina pectoris. Now I venture to say unhesitatingly that Dr. Brunton's discovery of the use of nitrite of amyl in angina pectoris, notwithstanding his claim and Dr. Wilks's admission that it is the one solitary gain to medicine from scientific pharmacology, has nothing to do with Dr. Brunton's experiments on animals, but is an ordinary instance of haphazard empirical therapeutics. As soon as nitrite of amyl was discovered it was observed that mere inhalation of it caused almost immediate intense blushing, fulness of the head, and increased rapidity of circulation. Dr. Brunton had a case of angina which had resisted all sorts of remedies, including even bleeding. As he was trying all sorts of medicines, he thought of giving amyl nitrite, which, as it obviously caused a rush of blood into the small bloodvessels, might possibly relieve the heart which was presumed to be oppressed by the blood which could not get well away from it. The relief of the fit was very rapid, but Dr. Brunton does not pretend for a moment that there is any cure effected by the amyl, and this as an illustration of rational therapeutics is precisely on a level with a purgative in constipation, or Junod's boot in congestion of internal organs. Dr. Brunton's experiments with the drug on dogs. and rabbits are, as usual, contradictory; it lowers the bloodpressure in rabbits considerably, but only slightly in dogs, because in the latter it quickens the heart's action, unless the vagus is divided, as it also does in man. So the inference would be that it would have but little effect on the blood-

pressure in man unless his vagus were divided, which would hardly be admissible even for the relief of an attack of angina pectoris. So that after all Dr. Brunton's model case illustrative of the value of scientific pharmacology to therapeutics, which Dr. Wilks says is the only instance known to him of its value, turns out to be no case at all illustrating the utility of this modern pharmacology. I have searched Dr. Brunton's book in vain to find any other instance of the therapeutic uses of drugs being even remotely connected with their observed effects on rabbits, dogs or frogs. Frogs seem to be Dr. Brunton's favourite subjects of experiment, but we can scarcely imagine any creature less suited for teaching us what would be the probable action of drugs upon man. A cold-blooded reptile, with an utterly different anatomical construction of circulatory and nervous system; a creature that will live almost as long without a head or brain as with one, that can exist without breathing for an indefinite time, that can give no account of its sensations or sufferings by cries or moans, must, one would think, be utterly unadapted to teach us aught but the crudest and coarsest actions of drugs on its own low organisation. But as for these actions enabling us to infer what the effects of drugs would be on the highly organised human being, the idea is preposterous. Two different species of frogs even will offer quite different reactions to the same medicine; thus the r. esculenta and r. temporaria are acted on quite differently by caffein and pilocarpin, and probably by many other drugs, and yet the only obvious difference between these two to the unscientific eye is that one wears a green coat while the other is clad in more sober brown. frogs so differ among themselves in their sensitiveness to medicines, how much more must they not differ from human beings? One point of resemblance to man frogs do possess, wherein they differ from all other animals—they have calces to their legs; but this will hardly constitute them fit representatives of humanity in the absence of other structural resemblances. But unsuited as they are for such experiments, Dr. Brunton's frogs are often rendered still more unsuited by the dreadful mutilations to which they are often subjected before the experiments are performed. Their brain, or a portion of it, is sometimes excised; nerves here and nerves there are divided, or they are saturated with large doses of atropine, muscarine, curare, or some other poison, in order to stupify or benumb some set of nerves

which it is supposed might interfere with the action of the drug to be experimented with; or the heart alone, separated from the body, is operated on, or even a portion of the heart, as the ventricle without the auricles, or vice versa. Under these and similar abnormal conditions drugs are carefully and laboriously tested, and the results are supposed to give valuable scientific information as to the properties and modes of action of those drugs. We are assured over and over again by writers in the medical press and by lecturers at the schools that the results obtained by such methods of investigation are of infinite value to therapeutics; by these means alone, or chiefly, we are assured, can the art of medicine be advanced. There are a few exceptions to this general chorus of laudation, among whom Dr. Wilks stands out conspicuously, who in his Birmingham address utters this discordant note: "The method has seemed to me to have so often failed when put into practice, and so brought discredit on the therapeutic art." Dr. Brunton, however, seems to have no doubt of its excellence, and in his work he gives elaborate pictures of the complicated machinery he uses for carrying out his investigations on the lungs, heart, muscles and nerves of frogs and other animals, down even to that drop of protoplasm, the amœba, two figures of which he gives engaged in ensnaring and digesting a bacillus.

That such investigations are not of the slightest use to therapeutics is elaborately proved in Sections III. to VI. of Dr. Brunton's book. I take almost at random a few specimens illustrative of the pharmacology and uses of drugs.

Platinum.—The salts of platinum, we are told, appear to paralyse the centres for voluntary motion in the cerebral lobes, irritate the motor centres between them and the cord, and lessen the excitability of voluntary muscles in frogs. They cause paralysis of the peripheral ends of the vasomotor nerves in mammals. Its uses are to distinguish potassium from sodium and to precipitate salts of ammonium and of organic alkaloids. Therefore no therapeutic uses at all are inferred from its ascertained effects on frogs and mammala.

Staphisagria contains two important alkaloids, delphinin and staphisagrin. The latter paralyses motor nerves in frogs and kills mammals by paralysing respiration. The former causes slowness of pulse and respiration, paralysis of spinal cord, and death by asphyxia. It stimulates the vagus centre in the medulla, and also the accelerating centre

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It slows the respiration by an action on the for the heart. slowing fibres of the vagus, paralyses the ends of the vagus in the heart, and also the cardiac muscles. Uses.—"Staphisagria is sometimes used externally as a parasiticide in the form of an ointment." So after all the above investigations into the mode of action of its alkaloids, the only therapeutic use that can be found for staphisagria is to kill lice! It is difficult to see how these experiments on frogs have helped to come to this therapeutic conclusion, nor am I

aware that frogs are troubled with lice.

Pulsatilla.—The alkaloid anemonin has a depressant action on the circulation, respiration and spinal cord; it causes slow and feeble pulse, slow inspiration, coldness, paralysis, affecting first the hind- and then the fore-legs, dyspnæa and death without convulsions. In poisoning by extract of pulsatilla convulsions are always present. Uses.—"It has been used in amenorrhea, dysmenorrhea, catarrh of various mucous membranes, bronchitis, and asthma." If any one is so simple as to suppose that these therapeutic uses of pulsatilla are deductions from its effects as given above, I may at once undeceive him by letting him know that they are merely copied without acknowledgment from a homeopathic manual.

Santonin, we are told, when given to a frog causes paralysis of the cerebrum, stimulates the medulla, causing convulsions. In man it causes headache, giddiness, vomiting, and death by convulsions, with paralysis of respiration between the convulsions, and blue and yellow vision, which, according to Dr. Brunton, fully accounts for its use as a vermicide for round worms; he might have added, and "for

the milk in the cocoa-nut."

Dick Swiveller's Marchioness said if you could "make believe" very much you could persuade yourself that peel in cold water makes excellent wine. Similarly Dr. Brunton in his Goulstonian Lectures says that you need to "make believe" very much to accept the medical systems hitherto promulgated, but that his own, being based on facts, requires no "make believe." think the readers of this book will hardly credit this, for they will find it necessary to "make believe" very much indeed in order to see how his experiments with drugs on frogs teach anything as to their action on human beings, or their utility in human diseases. In fact, it would require much less of a "make believe" to appreciate the Marchioness's wine than to see the connection between the action of staphisagria on the vagus of a frog and its therapeutic

use as a destroyer of lice in the human hair.

I might multiply such examples from Dr. Brunton's book of the utter uselessness of the knowledge obtained by elaborate experiments on frogs and other animals for therapeutic purposes. In fact, the "uses" of the drugs always present a grotesque non-sequitur to their ascertained effects. The absolute want of connection between the two reminds me of the lectures of Professor Monro tertius, which I had to attend now nearly half a century ago. This worthy used to read to us the manuscript lectures of his more distinguished father and grandfather, and as he frequently turned over two pages at a time without noticing his mistake, his statements sometimes were of a very surprising character. I remember him on one occasion gravely reading out, "Dr. Anderson died suddenly after a hearty meal of Cheshire cheese, which proves that the marrow does not nourish the This is not a bit worse than Dr. Brunton's minute description of the action of staphisagria on the motor nerves, vagus, medulla, spinal cord, pulse and respiration, followed by the important information that it is sometimes used for killing lice, as the only therapeutic deduction from its ascertained effects on the animal organism.

But it is not only in medicines that have been laboriously tested on mutilated frogs that we observe the surprising want of connection, from an allopathic point of view, between their pathogenetic action and the therapeutic uses This discrepancy occurs in the case sttributed to them. of drugs whose action is well known in consequence of the frequency with which their poisonous effects have been observed in man. In this way the action of arsenic on the human organism is pretty well known. Dr. Brunton tells us it causes irritation of stomach, colicky pains, diarrhea, mucous evacuations tinged with blood. In larger doses it causes gastro-enteritis, comiting and purging, rice-watery evacuations, collapse, livid surface, violent cramps. strangury, priapism, suppression of urine or bloody urine. Irritation of eyes, coryza, short dry cough and white tongue are among the symptoms of chronic poisoning. Its therapeutic uses, we are told, are locally for cancers; internally its action on the intestinal canal is tonic and astringent. the stomach it stimulates the appetite, allays pain, and checks It may be given in irritative ayspepsia, in comiting.

gastralgia, heartburn, the comiting of drunkards, in gastric alcer or cancer, in diarrhaea occurring immediately after food, ague, headache, neuralgia, rheumatism, gout, angina pectoris, chorea, epilepsy, whooping cough, asthma, spasmodic sneezing, chronic bronchitis, ordinary catarrh, commencement of phthisis. By comparing the morbid conditions caused by the medicine I have italicised with those it is said by Dr. Brunton to be useful for, it will be noticed that they are extremely similar, showing that when the effects of a drug are observed on the human being and not on frogs the homeopathic rule is the only one that explains its remedial effects. Had Dr. Brunton looked a little further afield he might have found that among physicians of his own school arsenic has been found valuable in Asiatic cholera, from which cases of poisoning by it can sometimes hardly be distinguished, as he himself says (p. 641).

Phosphorus lowers the blood-pressure in mammals, slows the beats of the frog's heart, renders them powerful, and finally arrests them in systole. Very interesting no doubt to frogs, but it hardly explains the therapeutic uses of phosphorus, which we are told has been employed in cases of nervous debility, neuralgia, wakefulness, paralysis, locomotor ataxia and impotence, leucocythemia, osteomalacia, and skin diseases. Dr. Wilks does not think so much of this medicine. He says: "I never remember seeing more than one patient the better after taking phosphorus, and therefore am bound to look upon this as a coincidence. In my private pharmacopæia I have attached to the word phosphorus the name 'humbug.'" Neither do the effects of poisonous doses of phosphorus on the human subject, such as caries of the lower jaw, gastro-enteritis, vague pains in limbs and loins, fatty degeneration of kidneys, blood-vessels, and liver, throw much light on the above therapeutic uses.

I need not adduce any more examples from Dr. Brunton's book of the complete discordance of the physiological effects of medicine on the lower animals with their recorded therapeutic uses. The connection seems to be of the same kind as that between Goodwin Sands and Tenterden church steeple. The only instances of a real connection between the physiological action of a drug and its therapeutic use to be found in Dr. Brunton's book is when some well-marked effect on the healthy organism, as of ipecacuanha or apomorphia in causing vomiting, leads to their employment in disease to cause vomiting, or of such drugs as jalap or aloes in causing

purging leads to their employment as purges; but it is not at all clear that such violent medicinal actions are ever necessary for the cure of diseases; very often, indeed, they are actions which are only injurious and not remedial.

The discordance between the different parts of Dr. Brunton's book is nowhere more obvious than in his "Index of Diseases and Remedies." In this the names of diseases in alphabetical order are accompanied by their remedies, and the most superficial and cursory examination of these shows that many remedies for diseases are given of which no mention is made in the part of the work to which reference is made respecting these remedies. We shall give only one instance. We are told in the index that bryonia is a remedy for bilious headache, dropsy, dyspepsia, endocarditis, epilepsy, headache, hepatitis, serous inflammation, meningitis, pericarditis, peritonitis, pleurisy, pleuro-pneumonia, pneumonia, acute and chronic rheumatism, splenic affections, strabismus, synovitis, tetanus, enlarged tonsils, toothache, tumours, typhoid fever, vomiting, yellow fever. We turn to the page referred to in each of these cases, and find only this in reference to the use of bryonia: "Its chief use was that of a hydrogogue cathartic, but it is now superseded by jalap." Nothing more. What is Dr. Brunton's authority for all those uses of bryonia mentioned in the "Index of Diseases and Remedies"? We turn to his "Bibliographical Index," which purports to give the references to the works where the medicines described in the body of his book are treated of. No mention of bryonia here Perhaps he will be good enough to tell us in a future edition where he learned all the above uses of bryonia. Many of the diseases are those in which bryonia is known to be useful in homogopathic practice. Has Dr. Brunton, in compiling his "Index of Diseases and Remedies," been consulting some homosopathic manual-Laurie or Ruddock, for example? This seems to be the most probable explanation. and it is corroborated by many other similar instances in this "Index." In fact there is nearly as much of homeopathy as of old school practice in the index. To take only a few instances. Thus pulsatilla is said to be a remedy for earache, thuja for condylomata, phosphorus for pneumonia, apis and phytolacca for tonsillitis. These and fifty others could only have been derived from homocopathic works. What a poverty of therapeutics this displays when the allopathic author must search the homoeopathic materia medica in order to complete his list of nominally orthodox remedies! Aconite, to judge by the "Index," seems to be in Dr. Brunton's opinion the nearest approach to a universal panacea, for he tells us it is a remedy for ninety-two of the diseases he enumerates! These diseases include all sorts, from the most trivial to the most serious, from cold in the head to cerebro-spinal meningitis, from sprains to pneumonia, from toothache to yellow fever. Like the elephant's trunk, which will pick up a pin or root out an oak, nothing is too small, nothing too big, for this wonderful remedy. It is the great Nongtongpaw of the pathological domain; the list of diseases it dominates includes half the nosology. And yet before Hahnemann discovered its curative virtues it was almost unknown to therapeutics, or known only as a virulent poison

to be shunned by the practitioner.

Dr. Brunton's work has been lauded to the skies by every medical periodical of the orthodox school. The language of praise has almost been exhausted by its reviewers. According to the British Medical Journal "it is simply a mine of wealth both for students and practitioners. It is thoroughly practical and reliable." The Lancet says it is "a scientific treatise worthy to be ranked with the highest productions in physiology either in our own or any other language." The moribund Medical Times and Gazette-and the testimony of dving periodicals, as of dying men, is as weighty as an affidavit -says it is "a work which marks a distinct epoch, a turningpoint in the history of medicine." We may therefore accept it as the ne plus ultra of orthodox medical science. That being so, I can only say what a miserable condition of that science does it reveal! With infinite labour, with enormous expenditure of time and patience, assisted by complex, ingenious, and expensive machinery, Dr. Brunton makes trials of drugs on the several organs of animals, chiefly frogs. "Viscera ranarum inspexi!" he may exclaim, and with what result? What conclusions can he draw from his "prognostica ranarum" that will be serviceable to the practitioner in the use of these drugs on the diseased human frame? We defy him to show from all his experiments one single useful therapeutic deduction. Dr. Wilks-who is at present the great Mahdi of medicine, with a rallying cry to this effect, "There is no scientific therapeutics, and Dr. Wilks is its prophet "-Dr. Wilks, I say, considers that Dr. Brunton has made one, and only one, hit in his recommendation of amyl nitrite for the relief of fits of angina pectoris.

as I have already pointed out, this is not an example of therapeutic use derived from experimental physiology, but merely of the empirical employment of a new drug. 'All these careful experiments on mutilated animals and parts of animals are utterly useless to therapeutics. Brunton and his collaborators, to whom an admiring crowd of credulous votaries were looking for useful therapeutic deductions from their experiments, must, like the aruspices of old, have been unable to keep from laughing in one another's faces whilst poking over the entrails of their mutilated victims—if they have a spark of humour in their nature. But what sense of humour, what common sense even, can we attribute to men who could go on day after day investigating the actions of drugs in this way, while every fresh experiment showed them that not an atom of a hint for their therapeutic use was afforded by their method of investigation? And Dr. Brunton gravely gives the results of his useless experiments side by side with the therapeutic uses of the drugs, when any one can see-and none better than Dr. Brunton himself—that the experiments have no bearing whatever on their remedial properties in disease. Dr. Brunton tells us that more than fifteen years ago he "had a work on Materia Medica completely written out and ready for the printer," but on going through it "he found so many unsatisfactory statements and uncertainties regarding the mode of action of drugs which he thought he could decide by a few experiments, that he waited for a little time in order that these doubtful points might be settled." Well, he took a long time, and made many experiments, and rewrote his work; and I venture to say that he has settled no doubtful points by these experiments, which are valueless to therapeutics, and would be misleading, only nobody, not even Dr. Brunton himself, would look for leading from them. Had he waited for fifteen or even five years longer I am sure he would have sent the MS. of this book to the waste-paper basket to keep company with the other. Dr. Brunton is an examiner in materia medica in the University of London, the Victoria University and the London College of Physicians. He pities the poor candidate being examined in certain useless subjects, and I suppose he would substitute for them the valuable information he gives in this book respecting the mode of action of drugs on frogs and other animals. If so, I pity the poor student, who will consider himself out of the frying-pan and into the fire if he is to commit to memory all the unconnected stuff Dr. Brunton here sets down.

So little confidence does Dr. Brunton show in his method of discovering the therapeutic virtues of drugs, that in his "Index of Diseases and Remedies" he borrows largely, without acknowledgment, of course, from the homeopathic school—so largely, indeed, that the reader must be dull who fails to perceive the incongruity of the Index with the body Why does Dr. Brunton thus engraft the of the work. therapeutic teachings of homocopathy upon the old allopathic routine? Is it to show his catholic spirit, his eclecticism, that would take his remedies wherever he could find them—even from homeopathy? Hardly, I should think, else he could not have been in such a hurry to endorse the illiberal behaviour of his publishers in refusing to insert in the *Practitioner* an advertisement of a homoeopathic book. rather think Dr. Brunton must be a homeopathist in disguise, who takes this not very straightforward method of introducing valuable homeopathic remedies into the orthodox school. "Perhaps he did right to dissemble his love, but why did he kick me downstairs?"

But even this kicking downstairs may be looked upon as a mere blind to lull any suspicion that he is bent on teaching the homoeopathic heresy. And all those experiments on frogs and bits of frogs may be considered as mere dodges to throw dust in the orthodox reader's eyes, and persuade him that after all, though the reader cannot see it, there is some subtle connection between frog-pharmacology and the therapeutics he teaches. No doubt he knows his orthodox believers well, and is assured that without a mass of pseudoscientific jargon about paralysing the vagus or tickling up the medulla, depressing the circulation or irritating the respiratory centre of a frog, he never could convey to receptive allopathic ears the useful homeopathic facts he gives in his Index, such as that bryonia cures pleurisy, phosphorus pneumonia, cimicifuga myalgia, dulcamara rheumatism, phytolacca tonsillitis, cannabis, cantharis, and pulsatilla gonorrhea, hepar sulphuris suppurating glands, etc., etc. Dr. Brunton says (p. 27) that homeopathy is not "a universal rule of practice;" possibly not, but as in his Index Dr. Brunton gives one or more remedies culled from the homeopathic materia medica for almost every disease mentioned, he shows the rule to be very nearly universal. But he never could have got the ordinary allopath to look at his grains of homeopathic wheat without a plentiful admixture of experimental physiological chaff relating to frogs, though we are sure his readers would derive quite as much therapeutic instruction from a perusal of the pathetic ballad of "Froggy would a wooing go," and Dr. Brunton would have earned a fairer claim to the gratitude of his readers if he had given them a good receipt for a fricassée of the hind legs of edible frogs than by all his useless information as to how drugs act on their vaso-motor centres, or on those of their kinsfolk the

common frogs of our ponds and ditches.

I would give this advice to any one who has purchased this book: Cut out the "Index of Diseases and Remedies," and keep it carefully, it may give you some useful hints as to the proper medicines for various serious diseases. true that the practitioner will find that Dr. Brunton's "tips do not always come off," as the Medical Times said of Ringer's similar appropriation of homeopathic remedies, the reason being that no individualisation of varieties of the same nosological disease is attempted, which is essential to successful treatment. However, the reader will find enough to excite him to further inquiry now that he knows the source whence Dr. Brunton derives his therapeutic "tips." As to the rest of the book, that is mere waste paper, and you may consign it to the basket devoted to the reception of such matter. It is merely an elaborate display of old physic gone to the—frogs! Poor old physic! she has hardened her senile heart against her young homeopathic sister, and treats. her with cruelty and injustice, so, like Pharaoh, she is cursed with a plague of frogs. Perhaps if the frogs were consulted they might remonstrate as of yore: "What is fun to you is death to us;" or, as we are told by Æsop that they are very ambitious creatures anxious to puff themselves up to the size of oxen, they might be "glaikit wi' pride" to find that they are regarded by our experimental pharmacologists as indispensable to the development of medical science, which threatens to become ere long a mere frog-pharmacology.

Seriously, is it not time an end were made of the farce of pretending that orthodox medicine is rational and scientific, that this pottering over the actions and reactions of bits of frogs brought in contact with various drugs is helpful in determining the remedial powers of these drugs? Is not this book of Dr. Brunton's the best proof that could be given of the unscientific character, irrationality and futility of this new science of pharmacology? Could anything be devised

more calculated to "bring discredit on the therapeutic art," as it seems to Dr. Wilks to have already done? Experiments conducted apparently with the most elaborate care prove utterly useless to the object that ought to be uppermost in every physician's wish—the advancement of thera-

peutice.

We have wearisome accounts of the effects of drugs on frogs and mammals which lead to no knowledge whatsoever of their remedial possibilities; indeed, in some cases such knowledge is not even alluded to as the object and aim of the experiments, as for example in the case of platinum, the pathogenetic effects of which on frogs and mammals are duly stated, but the uses of the drug itself are only as a chemical reagent. Compare this, the latest outcome of "scientific" and "rational" medicine, with such a work as Dr. Hughes's Pharmacodynamics, and see on the one hand a mass of useless experiments on animals which lead to no advantage to therapeutics, on the other a clear and connected account of the actions of drugs on the healthy human organism, which serve as the sure and certain guide to the successful employment of these drugs in disease.

"Rational therapeutics," Dr. Brunton would have us believe, is what he teaches in this book. I have given above Dr. Brunton's definition of rational therapeutics, and all can see that the therapeutics in this book are not entitled to that appellation, for however perfectly "the pathological conditions occurring in the disease" may be known (and they are mostly only guessed at), the pharmacological knowledge obtained in Dr. Brunton's manner gives us no hint whatever as to what drugs we shall require to employ "in order to remove or counteract those conditions." I was very unwilling to come to this conclusion as to the uselessness of Dr. Brunton's painstaking and laborious experiments.

¹ In the Goulstonian lectures before alluded to frog-pharmacology plays a conspicaous part, and a portrait of a frog is one of the illustrations. The advance of the sciences, too, is said to resemble "a game of leap-frog;" in short, Dr. Brunton seems to be as incapable of writing a therapeutic memoir without bringing in the frog as Mr. Dick was of writing a memorial without lugging in the head of King Charles. In the eighth of these lectures Dr. Lauder does really give an instance where the remedial power of a drug was inferred from experiments on animals. Conium was found to deaden the motor nerves and enfeeble the spinal cord, therefore it must be the best possible remedy for chorea. Here then surely was a convincing proof of the value of experimental pharmacology to the medical practitioner. But alas! our medical iconoclast, Dr. Wilks, knocks this pleasant pharmacological idol on the head. Speaking of conium in chorea he says, "It was given largely, even to poi:onous doses, and then put aside as valueless!"

Lateat scintillula forsan! I said, so I searched his book diligently to see if I could find anything to avert an adverse verdict; but no! I could not discern that his frog-pharmacology had given one single hint as to the therapeutic use of any one medicine. It is sad to think how this labour of years is entirely wasted, and what useful results to therapeutics might have accrued had it been wisely devoted to the only pharmacological investigations that are profitable for therapeutics, viz., those made on sentient and intelligent human beings. With the exception of Dr. Brunton's unacknowledged borrowings from homosopathy his therapeutics are simply and solely "empirical," and empirical the therapeutics of old physic must remain until it adopts the only rational rule of drug selection, similia similibus curentur.

#### NOTES BY THE WAY.

By Dr. Ussner.

# Injury to the Eye.

August 25th, 1885, a boy named Dearlove presented himself. He has convergent strabismus of right eye. When the left is closed he is able to draw the right some way towards the axis. This is the history. Some months prior to his visit a boy thrust a sharp-pointed stick at him, which struck his right eye. The conjunctival space immediately filled with blood. It occurred to me that the external rectus was temporarily paralysed by the blow, internal squint resulting. If this was so, thought I, the powers of Arnica would be well and appropriately tested. He saw double, and one only wonders that dislocation of the lens did not This untoward event is, we know, averted again and again by the resilience of the globe in its embedded fat. I saw him but three times, prescribed Arnica 12, and on October 5th the eye had fairly recovered itself, and vision was nearly normal. Nothing could be a finer example of the deep and far-reaching powers of Arnica.

## A Gastro-Cerebral Attack.

Miss P., aged three years.—October 6th, in bed, tossing about, unwilling to look or be looked at, spoken to, or handled. Head hot to the touch, sleepless, thirst for drink often, cries out suddenly and sharply; photophobia; limb jerking, tongue white, "sweet smell" on breath, irritable,

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takes no food, pulse very high. Ars. 3 and Apis 12 alternately. Hyoscyamine 3 at night. She slept some time, but the next morning there was so much heat of head and wildness of look that I gave her Ars. and Bell. alternately, feeling convinced that the stomach mischief was the precursor and cause of the other, and retaining the Hyoscyamine at night. From the latter she got good sleep and double vision, crying out, "Mother, I see two hands." If this was not a medicinal aggravation I regarded it as such, and stopped that medicine after another night. Her bowels were very much confined.

October 9th.—Head-heat less and thirst abating—an evidence, I take it, that both medicines were doing their part, and she continued them to the 12th. Nux 12 acted slightly on bowels. She was excessively weak, taking no food. China 3x. Scanty action of bowels, torpid from sheer debility. Very useful now was Fer. Carb. Sacch. 1x. Continued it for a few days, and on the 24th changed it for the Fer. Citras c. Quina, 1x trit. She has marked loss of power

in the legs, they hang quite limp.

I did not see her again until November 7th, when the last prescription was Cocc. 6, three globules night and morning, and a small powder of Caswell and Hazard's vitalised phosphates twice daily. I value them highly, though the formula is complex enough to please any allopath. It gives me much gratification to say that this little child, so helpless, has become healthy. I feared she might be overborne by the head attack, and I was thankful to be able to say that in four years only one sickly child was added to my score of the mortality list. This short, sharp illness of three weeks, and subsequent distress, was traced to eating pears, and it is my belief that for some people that fruit is well-nigh as dangerous as poison; they produce colic and diarrhosa. Cool and luscious they are to the fevered mouth of the teething child. They must be used with caution; and gripes follow the use of stewed pears even when no cochineal can be suspected of being the cause. The thick skin ought always to be removed. The pathology of this case I make a present of to our friends the allopaths; and to those who object to the alternation I may observe that the occasional practice is singularly successful.

## Urticaria.

Two cases — one a gentleman. Measles-like; very red

rash all over the body; worse in lower limbs, knees densely covered; had eaten sardines the previous night. Pulsatilla \( \phi \) at once righted him. The other, a lady, who periodically has severe attacks, mostly one-sided, but on this occasion all over the body, of a red-blue kind, elevated in patches, and to the non-professional eye frightful-looking; the stinging very severe. Her former history made me select Rhus, somewhat to her relief. The next day the etinging was so severe, and the stomach distress (due in this instance to pork and ham), that I prescribed Apis 12 and Arsenicum Alb. 3 with immediate relief. She had one differentiating symptom, which pointed to two medicines, Psorin and Urtica Urens, but there was no history, as far as I could find, of a suppressed eruption at any period of life, so the latter was given. The symptom was this: As soon as she lies down again eruption and itching cease, reappearing on rising. I had made a note of this in my interleaved Lilienthal from Burt, and it stood me in good need. The first time I ever saw her I gave Rhus, which did not help her. It did, however, the second time, but nothing like the Apis. An allopath saw her in my absence, and gave Bicarb. Soda internally and in lotion. He might as well have "struck his hand over the place" and expected recovery. The right medicine will always be the shortest and quickest. Witness another case of urticaria in some past notes, when there was itching, one-sided eruption, and leucorrhœa; cured by Kreasote, thanks to Guernsey, the medicine, and, as I believe, also the potency; instanced in the case of a young lady who had a persistent eruption, vesicular (these endless eczemas) of hands and face, like grocer's itch, burning furiously, and disfiguring to her. Sarsap. trit. 1x for a long time kept it down. It looked at times so like walnut eruption that I gave Nux Juglans 1x, but it was not like enough, or it would have cured it. Rhus of checked and for a time stopped it, but after a little it was as bad as ever, and she began to suggest a skin hospital. The very name of a hospital always spurs me to increased diligence, I do so hate them. I felt sure Rhus was her remedy, and in the 12th; she had it with prompt and, I hope, permanent effects-proof upon proof of the peculiar efficacy that is in the twelves, quite equal to the business. This Rhus 12 commended itself to my special admiration for the way in which it relieved rheumatic pains in the lower extremities, brought on by damp and wet weather. I hate theories almost as much as hospitals. Facts are grand things; they tumble over difficulties in such a facile way, and laugh, so to speak, at stumbling-blocks and blockheads!

As an illustration of the effects of overreaching causing strain, I may mention the case of a collie dog, who jumped with his fore-paws on a dining-room table; his heavy weight in getting down injured his spine, causing paralysis of rectum, bladder, and hind-legs. The poor brute, a most faithful creature, failed to take food, and his owner had him killed with prussic acid.

Wandsworth, December, 1885.

#### THE NORWICH CONGRESS.

ON THE THERAPEUTICS OF CONSTIPATION.

By ARTHUR CLIFTON, M.D., M.R.C.S. Eng. (Continued from p. 29.)

UNTIL the more complete Materia Medica is before us, we must eke out the deficiencies that we have by supplementing its records with clinical observations. The paper I now submit to you is a step, albeit a slight one, in that direction, but which by the full expression of your individual experience and reflection will, I

feel sure, be rendered more important.

In speaking of the treatment of constipation by the use of drugs, some notice must be taken of a few of our old and favourite medicines for that condition—such, for instance, as Alumina, Bryonia, Graphites, Hepar Sulphuris, Lycopodium, Nux Vomica, Opium, Plumbum, Sepia, Sulphur, and others, as no mention of them might imply that I had discarded them, which is by no means the case. So much has, however, been written before respecting them, and written so well, that I can add nothing more in their favour. There is room for differentiating and better defining their separate spheres of usefulness, but even this will be effected to some extent through a more careful study of the recorded pathogeneses, and the clinical observations of other drugs, and thus by the process of exclusion or displacement their range become more limited and justly apportioned, as it has been through the introduction of such remedies as **Esculus**, Hydrastis, and others. I believe most of them will continue to hold the first place for constipated conditions, but that some will nevertheless take a secondary rank. Alumina, Opium, and Plumbum present well-marked pathogenetic symptoms of constipation, and their value in this condition has been confirmed by many observers, yet I have never seen any curative results from Alumins, and only rarely good results from Opium or Plumbum. I have no satisfactory explanation to offer for this anomaly, except by attributing it to my own inability to see the scope and character of their action, and I only mention the point to call forth your opinion of the matter. I would also say that Collinsonia, a drug not included in the above list, stands out nevertheless very prominently in every respect as a constipation remedy, and is used, I believe, frequently with very good results. Yet with this, as with the three I have named before, I have been utterly disappointed.

I will now without further delay submit the indications for a few medicines in constipated conditions, which I have found of

especial value in the circumstances named.

Berberis and Chelidonium, although very dissimilar in their action in some respects, are so very similar in others, and so frequently indicated in certain gastro-hepatic and rheumatic conditions, that I shall speak of them together, and try to show

their clinical importance.

Judging of them merely from the pathogenetic symptoms recorded in relation to the rectum and stool, one would scarcely rank them highly as constipative remedies, and for this reason they have to some extent been passed over, but from their well-marked and known, but different hepatic action, I think when they are more frequently employed clinical experience will set them in the first rank for some states of constipation, and more especially so as regards *Berberis*, although its pathogenetic constipation symptoms are inferior to those of *Chelidonium*.

In cases of ordinary biliousness with constipation, Berberis is very valuable, the vertigo, headache, general dulness and heaviness, sleepiness, dark brownish yellow face, dry sticky tongue, aching and fulness in the liver, dark lumpy hard stools, and very infrequent, biliary matters in the urine, itching of the skin,—these symptoms more or less combined indicate its value, and when these are present I have seen it do much good, far more than Bryonia, Nux, Mercurius, and other drugs. The dose I use being from two to four drops of the tincture two or three times

a day.

In dyspeptic states with inaction of the liver Chelidonium is more useful—the face instead of being dark yellow as in Berberis is of a pale yellow colour, and the tongue is more coated, is flabby, showing prints of the teeth; or sometimes, as when the liver is less affected, the tongue is whiter and more pointed, the gastric symptoms are more numerous than in Berberis and are moreover peculiar, but well known, there are pains also in the region of the liver, the stools are pale, the opposite of Berberis, diarrheea and constipation often alternate, but the evacuations are also generally hard, difficult, and delayed; in such cases from Chelidonium, one drop of the

tincture two or three times a day, I have repeatedly seen good results, especially where there has been constipation following diarrhoa. In cases of biliary calculi both these drugs are useful—Chelidonium has appeared to me to act best in the conditions premonitory of the formation of calculi, and in preventing such formation, whilst the condition requiring Berberis has been characterised by a more biliary derangement, and by fewer gastric symptoms, when the calculi have actually formed, and have caused much pain. Constipation is very frequently a prominent symptom in these states, and with other symptoms is relieved by these drugs. In acute and subscute rheumatism these remedies are very valuable. We all know in such cases how often the stomach, liver, and kidneys are affected, the bowels become obstinately confined, and the urine scanty, while if these secretions can be set free great relief is given to the patient and the cure is hastened. In such cases some of our number have recommended Podophyllin. Now there is nothing in the pothogenesy of that drug, so far as I can see, to suggest its use in conditions of this kind except its influence on the liver and its action as a purgative. Although we may look upon the conetipation as a "characteristic" or greater symptom than those with which it is associated, if it is to be met it must be so by a drug having a closer relationship to the general disease than Podophyllin has, for its pathogenesy presents no resemblance to rheumatism at all. I have used it several times, but always with the feeling that I was not prescribing at all accurately; its action moreover is so uncertain, and so often leading to a more constipated condition, that I would rather resort to an out-andout antipathic aperient at once if an aperient is required. Here it is that whilst we have been giving Bryonia, Mercurius, or other remedies, Berberis and Chelidonium, or even Phytolacca (to be spoken of presently) come in well, for besides the gastrohepatic and urinary characteristics of the two former drugs, which correspond with the stomach and liver, and renal symptoms of rheumatism, they present in addition marked pathogenetic rheumatic symptoms, affecting the muscles and smaller joints of both upper and lower extremities. I have in such cases found Berberis do most good when the biliary symptoms were most marked, and Chelidonium in cases where the gastric symptoms predominated, where the perspirations afforded no relief, and the rheumatic pains have been made worse by every change of weather. Berberis in two to six-drop doses of the tincture two or three times a day, and Chelidonium in one-drop doses or less, have often set free the secretions and hastened the cure of such cases.

Phytolacca, I believe, will find a place amongst our drugs for certain constipated states. Allied in its action in many respects to Aloss, Podophyllin, Iris, and Kali Bichromicum, it is yet very

different in its action to either, and consequently its sphere of usefulness is different. It seems neither to meet ordinary dyspepsia, congestion of the liver, jaundice nor biliousness. have found it most useful in cases where there has appeared to be a general state of irritability of the gastro-intestinal canal. stopping just short of inflammation, characterised by a dry sore tongue and throat, ulcers in the mouth or fauces, metallic taste, tenderness of epigastrium, constrictive and colicky pains in the abdomen, including the region of the liver, rolling and gurgling of wind, desire to pass both wind and stool, with much urging, but inability to accomplish the same; or when a motion does pass, it is very small, bullety, and hard, combined or followed by slimy discharge, heat, and irritation of the rectum, with piles. In such conditions, especially if associated with rheumatism, two to four drops of the tincture three times a day have often acted very beneficially. The sixth and twelfth attenuations have sometimes relieved the general condition irrespective of constipation, but that has not been touched by such doses. I have also used Phytolacca with great advantage in other conditions, such as rheumatism, syphilis, tumours, etc., where constipation has not been present, which cannot be further noticed on the present occasion.

Graphites is well known to be a good chronic-constipation remedy, and my reason for referring to it here is that I think it is too often assumed to be of little use in acute and subacute forms of disease, and is thus overlooked in some gastric disorders, more especially in atonic dyspepsia attended with constipation. In that form of disease, when there is a dry, white, or sore tongue, dryness or soreness of the throat, desire for small quantities of liquid to alleviate the dryness, sour or bitter risings, irritability of the stomach or gastralgia relieved by warm drinks, with but few hepatic symptoms, but with large, hard, and lumpy, but retarded stools, dryness or fissure of the rectum, scanty menstruation, symptoms which are rather an expression or internal manifestation of a constitutional dyscrasia, characterised externally by a dry cracky skin, scurfy scalp, affections of the eyes and eyelids—eczema and constipation—in such

Graphites is very beneficial.

Mezereum is a medicine that may never take the first rank with other of our constipation remedies, but I feel sure that when its pathogenesy is more studied it will be used more frequently, and with benefit too, in constipated states. Although it possesses but few recorded symptoms of this condition, yet when these are taken in connection with other of its symptoms it presents a picture of disease not infrequently met with. Its usefulness has been the most apparent to me in cases where there has been a general torpidity of the intestines and want of peristaltic action, no desire for stool, and a necessity to strain in order to get any

evacuation, that being of a dark and bullety nature; in addition to these symptoms there may be a dryness of the tongue, mouth, and fauces, a gastric derangement, the symptoms being very like those of *Chelidonium*. Abdominal flatulence, rheumatism in the long bones and muscles which is worse at night in bed, the symptoms, too, appearing to be an expression of a constitutional dyscrasia. In such cases I have seen wonderfully marked beneficial action from this medicine, especially when found in old men who have seen much of "life," and suffered from much physic of many physicians, the dose I generally give being one

drop of the tincture three times a day.

Agaricus Muscarius is a remedy that will be used in some forms of constipation more frequently than it is at present, for the symptoms it excites on the rectum, and the alteration it causes in the stools, are in about the same proportion to the whole number of its recorded symptoms as are those of Graphites, Nux, Sepia, or of Sulphur. The first case that arrested my attention to this characteristic symptom of Agaricus was that of an old spirit-drinker, who, in addition to his nervous symptoms, had an obstinate constipation following a previous diarrhœa. Various drugs were given without much benefit, but Agaricus alone restored the peristaltic action of the bowels, enabled him to take more food, and greatly promoted his recovery. Since then I have cured other cases of constipation occurring from the same cause, and in which there had previously been a looseness of the bowels whilst under the influence of alcohol. Two cases of enlargement of the liver, like the early stage of cirrhosis and from excessive spirituous liquor drinking, attended with constipation to a marked degree, and with nervous symptoms, loss of appetite, insomnia, and other symptoms which you all know belong to the action of this drug, have been cured by it. The dose I usually employ ranges from two drops of the 1st decimal to two drops of the tincture three times a day.

Zincum is a drug that has a marked capacity to produce constipation. I have not used it much for that state, but in cases where that has been present to a great extent, and is persistent, an evacuation of the bowels not taking place oftener than once a week and with difficulty, the stools being hard, dry, and insufficient; the patient also suffering from nervous irritability, burning pains in the stomach, neuralgia, and all the outcome or result of mental work or worry. The third to the sixth attenuation of this drug has had a marvellous effect in improving the appetite and digestion, and in curing the constipation.

Forrum, from its recorded pathogenetic effects, ought to be a grand remedy for constipation, and, if so, I should imagine that it would be in the higher attenuations. We all know how most of the preparations of iron produce or aggravate a constipation when given in material doses for anomic and chlorotic conditions.

I merely allude here to this effect of the iron preparations in order to mention one form of iron which has not appeared to me to do so-viz., the ethereal tincture of the acetate of iron in two to six-drop doses twice a day. Neither has the Flitwick water, introduced to our notice by Dr. Cooper, done so in the few cases in which I have tried it.

Guaiacum has but two symptoms of constipation in its recorded pathogenetic effects. I am indebted entirely to Sir William Gull for my knowledge of that drug in this direction: he prescribed ten drops three times a day to a gouty patient of mine, which brought on constipation and homorrhoids to such a degree that I was again consulted by him. I merely gave a placebo for a week, and by the end of that time the symptoms subsided, the bowels acted more regularly for some weeks than they had done for years before. Since then, when his bowels have been sluggish, and his gouty symptoms worse, one drop twice a day has helped him. From that bit of experience I have been led to give it in two other similar cases and with benefit.

Staphysagria acts well for the constipation occurring in old gouty men of a strumous constitution. It has also relieved the same symptom when it has been present in cases of cystitis with

enlarged prostate.

Coca Erythroxylon is useful for constipation in "morningnippers," who indulge in "pick me ups" and suffer from gnawing pains at the stomach, loss of appetite, general debility and emaciation.

Stramonium has answered better than Belladonna or Opium in

constipation attending maniacal excitement.

Tabacum.—Where is the man of such well-regulated mind and habits who has not experienced the reactionary effects of the "fragrant weed." The "morning pipe," which at one time relieved his bowels, ceases to act in that way, and constipation of a persistent character is the result, attended with loss of appetite, of sleep, palpitation of the heart, etc., and for constipation with such symptoms, not the result of tobacco, this remedy

is highly beneficial in the third attenuation.

Of constipation occurring in connection with ovarian and uterine disease I must say but little, as my experience in that department of medicine is very limited in comparison with that of others, but I may say that whilst Opium has generally failed me in other states of constipation, yet that where that symptom has been prominent in connection with congestion or neuralgia of the ovary, Opium in three to five or six-drop doses of the first decimal dilution two or three times a day has been of great benefit in several cases.

Palladium and Phytolacca I have also seen good results from in constipation with ovarian disease.

The paper I have now presented falls very far short of my

aims and intentions. It is very imperfect, but I leave it with you believing that if it adds but little to your previous knowledge, it may be a stimulus to an expression of your own collective experiences on the matter, and so be the means of help to us all.

Dr. Clifton added that there was a great deal of difference between costiveness and constipation. Mortimer Granville had said that the difference between costiveness and constipation was as between the retention of urine and the suppression of urine.

(Discussion to be given in our next.)

# SOCIETIES' MEETINGS.

#### BRITISH HOMEOPATHIC SOCIETY.

At the meeting of this Society on Thursday, January 7th (Dr. Mackechnie, President, in the chair), Dr. BLACK NOBLE read a paper entitled,—

"A retrospective glance at the cases which have terminated fatally during six years and a half of general practice, with special reference

to some cases of Acute Tubercular Meningitis."

The first four cases to which Dr. Noble alluded were cases of pneumonic phthisis. In these, although the issue was fatal, much benefit had resulted from the use of Arsenicum Iod. and Hepar Sulph. (the latter generally given night and morning and the former through the day). Calcarea Carb. in high attenuations had also done good service in certain conditions. In one of the cases there had been great improvement, but after exposure to cold, through an imprudent act on the part of the patient, double pneumonia came on and the patient died. laryngeal phthisis was not benefited by any treatment. A child soon after birth developed spasmodic cough, worse on lying down, which nothing relieved—Bell., Dros., Ipec., etc.—and after death three glands were found enlarged and causing obstruction of the bronchus. Probably Calc. Carb. might have benefited if the case had been diagnosed in life. A man aged thirty, in apparent health, suddenly commenced to spit blood. Signs of catarrhal pneumonia were discovered, but not very Secale (in small doses) and Iodine did not relieve. Secale and Digitalis in large doses gave temporary relief. expectorated bloody fibrinous casts of some of the smaller bronchi. Eventually solidification of the lung occurred, symptoms of cerebral meningitis, convulsions, and death. was very much under the control of homocopathic remedies. Though the end might not be averted altogether, it could be indefinitely delayed, and life rendered much more tolerable to

the patient than by the old system of giving opiates. In a case of cerebro-spinal sclerosis, in which Belladonna and Gels. did good for a time, the patient at last became very violent, and was about to be removed to a place of safety, when a stroke of apoplexy carried him off. Cannabis Indica in full doses kept him quiet. Ignat. relieved the depression to which he was subject and the hysterical symptoms. All the genuine cases of tubercular meningitis he had seen had proved fatal. Dr. Johnson, of Maidstone, had had several cases in which there could be little doubt of the presence of tubercle, in which Kali Bromid., in doses of one-third of a grain to one grain, persisted in, in spite of apparent going back, had proved successful.

#### DISCUSSION.

Dr. Roth was glad Dr. Noble had had the courage to bring before the Society a paper on his failures. We often learned more from our failures than from our successes. Dr. Roth had had no practice with acute cases for many years. In his early professional life he had cured several cases of meningitis, apparently tubercular, with the hot-water treatment—the child being placed in a bath up to his neck, and cold water being poured on his head.

Dr. Dudgeon put down all those cases which ended fatally as tubercular, and all those in which recovery took place as cases of simple meningitis, though he could not distinguish between them by symptoms. In one case the right arm made a continuous circular motion, which led him to give *Hyoseyamus*, and

the child got well.

Dr. Hughes said the solitary success he had had was with Calo.-Carb. 30, and he believed this was a genuine tubercular case. The elder sister of the patient had died of it. There was the peculiar earthy complexion. Dr. Hughes agreed with Dr. Noble as to the favourable results of homeopathic treatment in cancer. In capillary bronchitis Tartar Emetic was the great remedy; when the medium-sized tubes were chiefly involved Kali Bichrom. and Aconste; and Bryonia and Aconste where the

larger tubes only were affected.

Dr. Goldsbrough doubted the efficacy of Bromids of Potassium in the cases of meningitis. He thought we must be doubtful of our diagnosis. We must seek to check the disease at the first. Two cases he had seen. One in which the patient was insensible for eight weeks; the patient, a child, recovered, but was completely deaf and deficient in intellect; he is now in Earlswood. Calc.-C. relieved the grave symptoms. He was interested in hearing of the efficacy of Arsenicum Iodatum. There is another medicine which he thought should come more to the front, especially in women—he meant Stannum. He had given it in one case with good effect. As a rule, Ant.-Tart. acted best in



his experience in the 6th dilution. Phos. and Ipec. seemed even

better than Ant.-Tart. in many cases.

Dr. CLARKE mentioned a case where there were all the symptoms of tubercular meningitis, which got quite well under Calc.-C. 30 and Bell. 3. Another case of congenital hydrocele and hydrocephalus, which also recovered under Bry. 1. of Dr. Douglas Maclagan's got well by shaving the head and

applying cold externally and giving Calomel internally.

Dr. MURRAY mentioned a case of scirrhus with multiple secondary deposits in the skin, where there was much benefit and, in fact, arrest of the disease by Calcarea Carb, and Arsenicum chiefly. He had seen two cases of tubercular meningitis, or apparently such. One case had been pronounced hopeless by the allopathic doctors in attendance. Dr. Murray was requested to take up the case, and under Bry. and Bell. he recovered completely. The other case did not respond to treatment, and ended fatally.

Dr. Renner had had no experience with the homoeopathic treatment of tubercular meningitis. He drew attention to the fact that sometimes children had symptoms of tubercular meningitis and got well; afterwards they had another attack and succumbed, the post-mortem showing that there was old as well

as new tubercular deposit.

Dr. EDWARD BLAKE thought in regard to pneumonic abscess the position of the abscess was of much importance; those above the bronchi got well, those below did not. He recommended inhalation, the room to be saturated with the inhalant. It might be homosopathic and in any dilution. The case of bronchial glands was very interesting. It should be diagnosed, but seldom is, because it is not thought of. Nux Vomica was of great service in cough on lying down. Lycopodium was useless in cases of flapping nostrils. Cancer was much modified by homoeopathic treatment. He knew cases where raisins or new wine would produce stomatitis. In one case of tubercular meningitis death occurred very soon after a dose of Hellebore 1. In regard to Stannum, the best provings have been made with the bichloride of Stannum, and he advised the use of this salt. One case of pneumonic abscess was cured by him with Stannum 6. but he had never been able to repeat the performance.

Dr. YELDHAM endorsed the opening remarks of Dr. Roth. He observed that pregnancy averts phthisis for a time, but soon after delivery the disease returns. In hemoptysis China o is one of the best "styptics" we have. Another, where a large vessel breaks, is the sesquichloride of iron. Gallic acid in gr. v. doses is excellent in vomiting of blood. In only one instance had Dr. Yeldham succeeded in curing a case where effusion had taken place within the head, and that was with Calomel. very difficult to salivate a child, and this child was salivated,



and recovered. Dr. Yeldham thought we had very great control over cancer. He gave Hydrastis  $\phi$ , gtt. v. three times a day, and Arsenicum, giving them on alternate days. He had kept cases at bay for years. He had one case where the lump was distinctly decreasing. He had had a case like that named by Dr. Murray of multiple deposits under the skin in all directions.

Dr. Galley Blackley remembered two cases where he thought recovery had taken place from tubercular meningitis. In one case the child had been under him for some years. At first there were symptoms of hydrocephalus. Cale. and Bry. were given for some weeks. Then Hellebore 1x was given. The child is thriving. The Hellehore was given persistently for months. Another case was treated in the same way with complete alleviation of the symptoms. He had one case of pelvic sercoma in which there was reflex vomiting, and nothing was retained on the stomach. Rectal feeding with peptonised foods was very successful for a time. A case in which there had been hæmorrhage on the brain eleven years before remained well till fourteen days ago, when he had a fall, hurting his head a little, but he thought little of it. After two days Dr. Blackley saw him. He was then semi-comatose; pupils contracted; the breathing was peculiar, and he was unable to expectorate. Gels., which produces this condition, was given, and the next day he was much better.

Dr. MACKECHNIE had seen a case recently of meningitis, probably tubercular. Iodide of Calcium 1x was given in frequently repeated doses, and the child recovered. In capillary bronchitis Tartar Emetic was, in his opinion, the chief medicine. In regard to cancer, he felt that much could be done. In a case he had seen much of recently Mezereum seemed to give for a time much relief.

Dr. Noble in reply thought it was absurd that we should not be able to diagnose between tubercular and simple meningitis. He had sured several cases of simple meningitis. One case recently in a family of healthy children; all the symptoms of tubercular meningitis were present, but on the ground of the family history Drs. Noble and Blair (his partner) excluded the idea of tubercle. The child had had a bad fall on the head some weeks before. Kali Brom. seemed to do good, but complete relief followed the bursting of an abscess through the ear. Dr. Noble relates a case of pneumonic abscess in the lower lobe of one lung, in which complete recovery ensued under Phos.

# REVIEWS OF BOOKS.

#### CYCLOPÆDIA OF DRUG PATHOGENESY.—PART II.1

WE are glad to receive the second part of this great work, and we congratulate the editors on the rapid progress they have made. The pathogeneses of twenty-six drugs are given in this instalment, and as far as we are able to judge, we are glad to find that the condensing, which in the first part was carried, in our opinion, much further than was justified, have been done more judiciously in the volume before us. We regret, however, that so much space and such good type have been wasted on the worse than stupid experiments on frogs of Ringer, Murrell, and Miss Nunn, of Boston, U.S. This may be suitable material for allopathic writers and therapeutists of the stamp of Drs. Ringer and Brunton to cumber their pages withal, but we look for better things in homocopathic works of pure materia medica. Of what earthly good is it to any one to know this?—

"Ringer introduced 3ss of ant.-orudum into cellular tissue of dog's back without effect. Fifteen gr. placed in peritoneal sac caused inflammation, and in twenty-four hours death, but without any peculiar symptoms."

There is a great deal too much of this kind of thing. We know it is considered to be highly scientific by the orthodox majority. But, as Mr. Matthew Arnold has pointed out. majorities are very apt to be wrong, and unless the remnant is pure enough and strong enough, the ruin of the whole is inevitable. If we base our practice on the pure effects of drugs as observed on healthy human beings, we have a right to call our work scientific. If we import into our pathogeneses observations like that of Miss Nunn on the "softened and gelatinous" skin of frogs poisoned with arsenic and antimony, we beg leave to say that we are destroying the scientific character of our work, even though the Royal Society itself should applaud and seek to confer on us the supposed scientific badge of its fellowship. But this is merely an ugly excrescence. other respects the work is one of sterling merit, for which posterity will be grateful.

<sup>1</sup> A Cyclopædia of Drug Pathogenesy. Edited by Richard Hughes, M.D., and J. P. Dake, M.D. Part II. Agaricus—Arnica. London: E. Gould and Son. New York: Boericke and Tafel.

# SPECIAL CORRESPONDENCE.

#### BIRMINGHAM.

THE most interesting event at the Homosopathic Hospital since my last letter was a Christmas treat given to the in-patients,

both past and present, on Wednesday, December 23rd.

The idea originated I believe with Miss Seaville, the Lady Superintendent, and Miss Youngerman, a lady probationer, who between them succeeded in a very short time in making all the arrangements and in collecting subscriptions sufficient to pay all the expenses.

Invitations were sent out to all who had been in-patients since Miss Seaville's appointment, a period of about nine months, and out of about seventy or eighty invited, fifty accepted, and there were besides eleven of those at present in the hospital who were

well enough to take a share in the festivities.

The large out-patient waiting room had been very gaily decorated for the occasion and was completely transformed, nearly the whole of one side of it being converted into a temporary stage, tastefully hung round with curtains, and the other half of the hall being arranged for three long tea-tables, at which the guests for the evening were given a substantial meal at five p.m., by way of opening the proceedings. The seats at one table were almost entirely filled with children, and it was very pleasant to see their familiar faces without the look of pain and suffering so many of them had worn in the wards.

At six o'clock, the tables having been cleared and taken away and the forms arranged facing the stage, the first part of the entertainment was begun, and consisted of a series of views from a very good magic-lantern, the exhibitor, Mr. Ensor, accompanying each picture with explanations and humorous criticism. I cannot refrain here from mentioning that Mr. Ensor is one of the resident surgeons at the eye hospital here, and noting the fact that neither he nor any of his colleagues made the slightest objection or hesitation to his coming to, and helping to entertain the patients of, an unorthodox (professionally speaking) hospital. Would the London hospital surgeons be equally friendly on a like occasion?

After this came the piece de résistance in the shape of a very capital performance of the sparkling comedy "My Uncle's Will," the characters being sustained by Miss Wood and her brothers, Messrs. A. and S. Wood. The actors were rather cramped by the very limited stage and approaches, but made quite the best of it under the circumstances. Every point—and the play simply bristles with them—was well made, and the audience was most thoroughly appreciative, as evidenced by

their frequent interruptions with laughter and applause.

Finally there was a Christmas-tree, from which some little memento was given to all present, and some also taken to those in the wards who were unable to be present at the distribution.

At intervals during the evening Miss Wood had played selections on the piano, and brought it to a fitting close with "God save the Queen," every one present having spent a most enjoyable evening; and so far as I have yet heard, not one has suffered from it since, as is so frequently the penalty for attending more ambitious entertainments on winter nights.

The bazaar committee have now got steadily to work, and the Town Hall has been engaged for the second week in May, when we hope to succeed in raising the final £1,500 required to place

our new building and the current account out of debt.

In the meantime we have been much encouraged lately by special donations, amounting to between £200 and £300, from some of our supporters, on the occasion of the annual Hospital Sunday collection, and by a gift of £200 from the trustees of the William Dudley Fund, the second sum of that amount our hospital has received from this fund since the death of its founder about ten years ago.

EDWARD M. MADDEN.

Birmingham, 17th January, 1886.

# REPORTS OF INSTITUTIONS.

LONDON HOMŒOPAŢHIC HOSPITAL

The number of patients admitted into the London Homocopathic Hospital continues to increase. The total for the year ending March 31st, 1885, was 656, and it appears that a yet larger total will be shown for the twelve months ending next March. The number admitted to the end of December was 505, and during the same month the average of beds occupied daily was the highest on record, reaching 66. On one day the number reached 72.

The latest development of the private nursing work of the hospital will afford much gratification to the medical profession, and prove of the greatest value to many of their patients. The hospital has sent some of its trained nurses to lying-in institutions in order to add to their training a knowledge of accouchement nursing. The result appears to be most satisfactory. One of the great wants of society is the want of skilful, intelligent, and careful nurses of this description. To know that a reliable, trustworthy, and properly qualified nurse can be arranged for at an institution like the London Homocopathic Hospital is a very great boon. To engage an irresponsible person who, without special training, is willing, for a consideration, to undertake such cases, is one thing; to secure a trained

and agreeable nurse responsible to the nursing authorities of the hospital, is something very different and much more satisfactory. Of this the members of the medical profession seem fully aware, as it appears that the number of applications for accordement nurses already received since the recent announcement of this new departure has exceeded expectation.

Dr. Charles Renner has been appointed a medical officer in charge of out-patients at the hospital in succession to Dr. Lang,

resigned.

Mr. A. H. Croucher, having completed his term of appointment as resident medical officer, has retired from that post and has been succeeded by Mr. Hermann Hilbers.

#### CONCERT TO THE NURSES.

Under the musical arrangements of Dr. Carfrae and Dr. Blackley, a concert was given to the nurses and their friends in the Bayes Ward on Thursday evening, January 21st. There was a goodly gathering, including members of the Board of Management, the medical staff, the nursing staff and their personal friends, and a considerable contingent of the nurses from neighbouring hospitals. The concert was a complete success. The singing of Miss Ebe Gray and Messrs. Dyved Lewys and Joseph Langman, and the violin solos of Misses Cardew and Griffiths being especially admired.

# Obituary.

#### DR. AMEKE.

It is with profound regret that we learn, just as we are going to press, that Dr. Wilhelm Ameke, author of the recently translated *History of Homocopathy*, died, after a long illness, at Berlin, on the 22nd of January, in the thirty-ninth year of his age.

## DAVID ROTH, M.D.

Ow Christmas Day homosopathy was deprived of one of the most remarkable among the many remarkable men who have embraced the doctrines and practice of Hahnemann. The career of a man like Dr. David Roth, of Paris, is a crushing answer to those who aver that homosopathy is the child of ignorance and superstition. In science, music, the fine arts, as well as in medicine, Dr. David Roth was recognised by those best able to judge as a man of solid learning, and to the correctness of their judgment his works remain to this day to bear testimony. Dr. Roth was, moreover, a skilful mechanician and an inventor of high order. For the last twenty years of his life he was retired from practice. This was in large measure due to the failure of his eyesight, which ended eventually in complete blindness.

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This deterioration of his eyesight was greatly contributed to by a large amount of nightwork which he did for the medical journals in order to help the widow of a deceased colleague, to

whom the proceeds of this work were given.

David Roth, the eldest brother of our colleague, Dr. M. Roth, of Wimpole Street, was born in September, 1808, and was consequently in the seventy-eighth year of his age when he died. After finishing a course of eight years of college studies in Kaschau, the capital of northern Hungary, he left for Vienna, where he studied medicine for five years, and there passed the yearly medical examinations. His college career was unusually brilliant, and he obtained his degree a year earlier than the ordinary time on this account.

At that time the cholera for the first time invaded Hungary, and a number of young medical men and other students who had finished their five years' curriculum were sent to various parts of Hungary to act in the emergency. Roth was sent to the district of Wieselburg, where he was engaged for several months in the treatment of the cholera patients, and where he gathered his experience in this most formidable complaint.

In the district lived the family of Count Zichy-Farraris, by whom the young physician was well received and his work appreciated. A few weeks later Roth decided on going to Paris, where it was feared the epidemic would soon make its

appearance.

As the Princess of Metternich was the daughter of Count Zichy-Farraris, the young man received the best letters of introduction to the Austrian Ambassador, Baron Rothschild, and others in Paris, where he was waiting for several months without the cholera appearing. He was thinking of returning, when one day he was called to see a patient suspected of suffering from the disease. From that time the cholera spread, and he

found many opportunities of gaining practice.

Later it appears that he began to study homeopathy, at that time still in its infancy, and he devoted all his energies to the study and propagation of the new mode of medical treatment. He wrote numerous articles in the French and German homeopathic journals, and in 1839 he had completed the great work La Clinique Homeopathique, which contained 5,000 cases of various diseases treated by single homeopathic medicines. He published this under the pseudonym of "Dr. Beauvais de St. Gratien," and he added a supplement, in which work he was assisted by his youngest brother, who had just then finished his studies. A translation of Bænninghausen's manual, La Revue Critique et Retrospective de l'Homeopathie, in four large volumes, L'Histoire de la Folie Musculaire (a work which was crowned by the Academy of Medicine), his writings on pharmacology, his studies on Pasteur's Researches on Fermentation, his studies on

the effects of arsenicum, La Journal Homeopathique, which he edited with Dr. Davet, and many other papers on homeopathy in French and German homeopathic journals—these will give some idea of his energy, great activity, and earnest desire to do his best for homeopathy. He was the first to criticise Hahnemann's Materia Medica Pura, and to try and go to the sources of all quotations to be found in the Organon.

In 1840, and during that period, he was much engaged in the invention of automatic counting machines, and he was very much encouraged by the great Arago to pursue his studies in this direction. He finally succeeded in making machines which automatically performed addition, subtraction, multiplication, and division. The Minister of Public Works, M. Dumont, in a

letter addressed to him on 29th June, 1840, writes:-

"Sir,—I have ordered the counting machines you have invented to be examined, and I have to acknowledge with pleasure that after the favourable report made to me concerning them, I have decided to order twelve machines for the purposes of the Public Works Offices.

"It is a pleasure to be able to give you this proof of interest

and satisfaction for the successful result of your labours."

Examples of his calculating machines can be seen in the Conservatoire des Arts et Métiers. About a year ago some foreign mechanicians wished to patent in France a counting machine, and had almost succeeded, when it was found that it was Dr. Roth's principle, invented about fifty years previously, which

formed the basis of their petition.

Dr. Roth being at one time the physician and personal friend of a family very high in financial circles, had his attention directed to the forging and falsifying of cheques, bank-notes, etc., which took place between 1840 and 1850, and he studied the subject for some time, and showed how easily all these documents can be imitated by photographic, mechanical, and chemical means. The result of these studies was that he prepared and drew copper-plates the imitation of which, as well as of the paper used, was made much more difficult.

As his taste for art was very great, he studied specially the history of engraving and etching. He was considered one of the first connoisseurs of engraving, and was often consulted by collectors, both public and private, who wished to obtain his opinion in dubious cases regarding the authenticity of a particular work. For many years he collected the works of Albert Durer and of the Petits Mattres, till both were complete; and during the last few years, when he had almost lost the use of his eyes, he prepared a universal history to be represented by engravings, etchings, lithographs, etc. This collection, beginning with the Merovingians, was continued to the present time; a part of the catalogue he had finished; a number of engravings

are still to be classified, and it is to be hoped that this collection, which in a historic and chronological respect is most interesting, will be presented to the National Library of France. His knowledge of art extended to many other branches—pictures, bronzes, china, etc. Having studied the various designs of bronzes and furnitures, he did for Drumont (whose talent he recognised while a working man) some designs, among which may be mentioned a large clock in his salon supported on each side by a large figure and various groupings, as well as some minor things, such as designs for bronzes for the decoration of cabinets, as well as some other clocks and ornaments.

Among other studies which he pursued was one of animal locomotion (especially of birds, the French aviation). His books on the subject he gave about two years ago to Professor Marey, the head of the Physiological Government Laboratory in the

Bois de Boulogne.

Dr. Roth was married to Nathalie Sassary, who died about seven years ago. She left him a widower without children. Since that time he led a very retired life, and occupied himself chiefly with his engravings, with music (being a pianoforte player), and he daily employed two readers, one for three hours in the afternoon, another for two hours in the evening. His memory and faculties were excellent, and through this five hours of reading he was au fait of everything going on in politics, arts, and the sciences, in which he took the greatest interest, as Dr. Tripier so nicely expressed in his speech at the

During the last few years of his life he had about two attacks of gout, from which he had never before suffered; and during the last few weeks he had slight attacks of oppression on the chest. On Christmas Day he took his usual warm bath, which he enjoyed very much, and which used to relieve him; and after having partaken of his coffee, which he pronounced even better than usual, he rang for the servant, asked her to open the window, and before she had time to return to his bedside he made an effort to breathe, raised his arms, and was dead. The expression of his features after death was very quiet and sweet. A cast was taken of the face. He was buried on Sunday, 27th December, 1885, in the vault at the cemetery at Montmartre, which he had bought years ago, and where his wife and stepson were buried.

Dr. Roth, of London (who was telegraphed for, but, of course, too late to see him in life), Dr. Claude, of Paris, and a number of intimate friends, were present at the grave, where Dr. Tripier

spoke a few eloquent words, closing as follows :-

"We lose thee, old friend, as we have known thee, unable to think of thee without the consoling thought that to the last hour thy life has been passed with good thoughts and good deeds."



### EDWARD CHRISTOPHER HOLLAND, L.R.O.P. Edin., M.R.C.S. Eng.

WE deeply regret to have to record the death of one of the oldest of British homeopathists, Dr. Holland, of Bath. some time Dr. Holland was known to be in failing health, but he did not give up work altogether till November last. The malady from which he suffered proved to be malignant disease of tibia. He died on the 5th of January at the age of seventyfive. His widow survives him, and he leaves besides one daughter and four grandchildren. Dr. Helland took his first qualification in 1833. He entered general practice at Honiton, and then practised at Rochdale, afterwards moving to Norwich. He succeeded Dr. Bayes at Bath in 1868, and ever since then has practised in that city. Dr. Holland was one of the earliest to join the homoeopathic body, and he was a member of the British Homosopathic Society from the year 1855. Dr. Holland was always held in high regard by his colleagues. He has upheld the credit of our school wherever he has laboured. His genial presence was always a much-looked-for element in the periodical gatherings of his medical friends; and they now realise with sad regret what they have lost in the removal of that bright and buoyant spirit.

# GENERAL CORRESPONDENCE.

#### A MEDICAL REFORM LEAGUE.

To the Editor of the Homeopathic World.

SIE,—Some time ago I came to the conclusion, as I find others have done before me, that the only way of obtaining full recognition of our position as professional men was by a direct appeal to the public. I stated this conviction to a prominent official of the British Medical Association, and he replied at once, "If you adopt that course there is no doubt of your success." I sent a circular to every provincial homosopathic practitioner soliciting an expression of opinion on the matter. If I remember rightly only fifteen replies were received. I came to the conclusion that under these circumstances it was not worth while to take upon myself the labour and expense of promoting the matter further. But I am firmly and fully convinced, after long consideration and many conversations with members both of our own body and of the opposite school, that the establishment of a Medical Reform Association is not only a public necessity

but would do incalculable good for the advancement of medical science. But in order that such an Association shall be able to accomplish good and substantial work, it is above all things

necessary that it should not start on a sectarian basis.

It can be shown that there are thousands of people who have the strongest objection to employ any practitioner who is ignorant of the principles of homoeopathy, that such persons, unless they live in large towns, are prevented from obtaining the services of such a practitioner in their hour of need by a shameful conspiracy which has for its object the maintenance of ignorance, on the one hand, and the intimidation of those who dare to possess certain knowledge, on the other. It would be the duty of a Medical Reform Association to expose this conspiracy, to take steps to prevent its operation from interfering with the liberty of the public, but it would not be politic for it to adopt the views of Hahnemann or any other reformer. An Association started on this basis would at once command the sympathy of the liberty-loving public, without throwing the onus upon them of adopting views upon purely medical subjects which they cannot be expected to clearly understand. Association could invite the assistance of all medical men who believe in freedom of opinion and freedom of discussion on medical subjects, and it would probably receive the direct support of eminent scientific men whose names would outweigh those of the medical dictators. A branch of this Association in every town in Great Britain, with an influential committee, would be a very powerful antidote to medical trades-unionism, and would be a factor to be considered by candidates for hospital and other appointments which depend upon the votes of the An annual meeting at the town where the British Medical Association holds its meeting, and a week in advance of such meeting, would cause a considerable flutter in the medical dove-cot, or perhaps I should say Boy-cot.

It is not only my opinion, but that of some of our prominent opponents, with whom I happen to be on intimate terms, that the present condition of affairs could not exist in the face of a public opposition of this kind, and some would be glad of the opportunity of escaping from the position in which they are

now placed.

A public Association for making known the principles of Hahnemann would be a good thing, but a neutral Association for protecting the liberties of the public would be a better. It is not for the laity to dictate to the medical profession what they should believe or what they should deny, but it is the manifest duty of the public to protect themselves from a conspiracy in a matter which concerns their health and their lives.

If those practitioners who approve of this mode of action will send you their names, it will not be difficult to immediately draw out a statement of the objects in view, and to form branches in the various towns in which such practitioners reside.

Yours respectfully,

MEDICAL LIBERTY.

P.S.—As an example of a case in which the action of a Medical Reform Association would prove useful I may mention the following. A gentleman residing in a town twenty miles from the city in which I practise, came to me in great distress. said, "My child has diphtheria, and the medical man cannot give us any hope of its recovery. He refuses to meet you in consultation, and has further intimated that if you see the child, and any emergency should happen in connection with the case, we must not expect any assistance from him, and he further hinted that such emergency was likely to arise." The anxious father was placed upon the horns of a dilemma; he felt that whichever course he adopted might have fatal consequences to his child. A Medical Reform Association would have the power of exposing such inhumanity, and such exposure would touch the pocket of the trades-unionist; this is the only argument to which they are amenable. In this case I was fortunately able to go at once, and, having directed that the paints and gargles ordered by the "scientific practitioner" should be placed where they kept their other rubbish, to assure the parents of the speedy recovery of their child, and my little patient that he would have no more brushes put down his throat and no more nasty physic. Four days later the child was up and at play.

Is the parent who has had such experiences as these to find himself in his hour of need cut off from the assistance upon which he has learnt to rely, because a conspiracy keeps medical men in ignorance and encourages them in inhumanity? This is the question upon which I would invite the opinion of the nation, and I have no doubt as to which way they would

answer it.

#### MEDICAL BOYCOTTING.

# To the Editor of the Homosopathic World.

SIR,—The communication by Dr. Dudgeon in your last issue affords striking evidence of the need for some united action on the part of all who are interested in homeopathy. For it is clear that there is but little toleration of our opinions or practice amongst the adherents of the dominant school. Unfortunately the relations between the old school and the new are rather those of "armed neutrality" than of friendly co-operation for the advancement of therapeutics. The latter consummation is indeed devoutly to be wished for, but it can only be attained by an entire change of front on the part of the intolerant section of

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the profession. Their present attitude is to some extent the result of ignorance of what homosopathy teaches, and of course "there are none so blind as those who will not see." The sources of enlightenment are accessible to all, but pride and prejudice bar the way. Instead of honestly investigating our system as a scientific matter, worthy at least of examination in the confessedly unsatisfactory state of the medical art,1 the whole subject is simply waved aside with lofty superiority, after the manner of Mr. Pecksniff, when disposing of troublesome questions. Although our more enlightened colleagues of the old school are constantly appropriating (without acknowledgment) the results of homoeopathic research, yet, in the general body of the profession, there appears to have been very little progress towards a more liberal or intelligent view of the subject since the days when the new doctrines were first promulgated. So long as this attitude is maintained there can be no real prospect of rapprochement, and it is futile to expect any change in the inscrutable laws issued by the dictators of the medical world. The modern spirit has succeeded in breaking down the bars to progress in many directions, but the shrine of Esculapius still remains jealously guarded against innovations. medical conservatism is doubtless only a survival of old-world ideas respecting an exclusive guild into which none might enter save those bearing some mysterious brand of the true faith. The next step in logical sequence would be a test of orthodoxy by which doctors might be warranted sound and free from any taint of the homoeopathic schism. But happily the day has gone by for such antiquated forms of obstruction, and medicine, like every other department of knowledge, must "move on," or cease to retain the confidence of intelligent people.

It is therefore surely time for us to unite in opposition to the "boycotting" policy which has already proved so detrimental to the interests of progressive medicine. Knowing the truth of homosopathy, and its beneficent results, we should indeed be unfaithful to our convictions if we were to submit to this attempted effacement. For such would appear to be the probable fate of the new school unless it is averted by some defensive measures. Although our position is naturally a strong one, based as it is on the solid ground of facts, it will be needful to combine all our resources in maintaining our rights as practitioners and cultivators of scientific medicine. What is needed is organisation to unite the lay and professional interests in the movement, for the matter is really much more important from a public point of view than many of the questions which are constantly being "agitated" by influential associations. I cordially endorse the opinion of Dr. Clifton that the lay

See the recent address on medical treatment by Dr. Wilks, Lancet, November 14th, 1885.



element is essential to the success of the "new propaganda." In contrasting the influential position of homocopathy in America with its discouraging aspect in this country, Dr. Dake attributes the latter result to our "deferential attitude towards the old-school authorities." In America, he tells us, the people have come to the aid of homosopathy, and in all attempts to mistreat our institutions or practitioners, "the thousand-tongued press is on our side, legislators are on our side; and as a result we have hospitals and colleges equal to the best in the world, and endowed with all necessary privileges and powers." Such an ideal will perhaps be regarded as beyond our reach in this old country, but it may at least serve to stimulate our efforts in the same direction. There can be no doubt that if the public were enlightened as to the true bearings of this matter we should enlist on our side a large and intelligent following. For I venture to think there is a sense of fairness and truth amongst the people of this country that would make their influence felt in support of our just claims to equality with the dominant school. It is most satisfactory to find that the movement initiated in your columns has already been productive of some good results, which, let us hope, augur well for its ultimate success.

Edinburgh, Jan. 13, 1886.

Yours faithfully, ALFRED PULLAR, M.D.

#### THE NEW PROPAGANDA.

## To the Editor of the Homeopathic World.

Sir, —I congratulate you on the response that has been made to your appeal. First, by our old friend Dr. Clifton, whose incisive and earnest letter will carry much weight both in the profession and amongst the lay believers in homeopathy. speaks with the authority which is begot of experience, and clearly exposes the fallacy of the idea that the superficial homosopathy now spreading amongst allopathic practitioners can have any permanent effect on general medical practice, seeing it is not founded on an appreciation of the homocopathic law. Secondly, by Dr. Dudgeon, in whose article I rejoice, and that it should have fallen to his lot to have such experiences to relate. The fact that a man holding his position in the profession has been subjected to insult from the bigotry and intolerance of the dominant school will do more to convince the halting homoeopaths, who are still content to remain quiet, than page upon page of similar tales from a general practitioner. Thirdly, by Major Vaughan Morgan, in his generous offer of a prize for the best essay on the subject of homocopathy. Here, as you remark in your article this month, "a layman leads the way." And this is as it should be, for this "Propaganda" is and must be essentially a layman's question;

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the advantages of the homocopathic treatment are theirs, and the more the knowledge of it is spread the greater will be their ability to avail themselves of those advantages. What is the position of many a homocopath at the present time? He has perhaps for years been treated according to that system, but from force of circumstances is compelled to change his place of residence, and when illness comes not unfrequently finds that there is no homocopathic practitioner within reach, and he is compelled to drift back and see himself, his wife, and his children treated by a system in which he has no confidence. This is to many a homosopath a great hardship, as it also is an undoubted hindrance to the spread of homoeopathy. The dearth of homoeopathic practitioners seems to me the first practical question which has to be dealt with. We must find out first why it exists, and then seek the remedy. One deterrent to the avowment of a belief in homoeopathy by the medical practitioner certainly has been the "trading on a name" scare, which has caused even old homoeopaths and worthy men to withdraw their names from the Homosopathic Directory and shirk in every way a public manifestation of their medical faith. This was and is a great mistake. Homocopaths have from the beginning kept themseves free from quackery, and ought to be strong enough in their honesty to defy such an imputation. How is the want to be supplied? That is a question on which there will doubtless be differences of opinion, but of one thing I am certain, it will no longer serve to trust to the permeating influence of homosopathy on the profession; the Micawber policy of waiting for something to turn up has failed, and we must make a new departure. We must convert the people at large, and thus create the demand, and perchance then the supply will follow.

In this work of conversion both lay and professional have their parts to play. First the laymen. In any district or town where at present there is no homosopathic medical man, let the homeopaths club together and guarantee to a suitable man a sum sufficient to form the nucleus of a practice. This sum need not be large; probably £100 a year for three years would be sufficient. If in many towns and districts this were done, and the facts brought under the notice of students of medicine. many would be induced to look into and study homeopathy, and as a necessity would in most cases become believers in that system. Each man so won would form a new starting-pointa new missionary to gain fresh converts. The circulation broadcast of a readable tractate, as proposed by Major Vaughan Morgan, would be most useful. The delivery of popular lectures in various parts of the country would, no doubt, also strengthen the hands of isolated practitioners. In these efforts the layman may prominently aid by helping to find the funds to carry on

the work.

But to my mind the most important part of the layman's work is individual effort; and it is this I wish to press most earnestly home to him. Let him make known his medical faith. and be ready to give a reason for the faith that is in him; let him, not recommending any particular practitioner, lose no opportunity of always and everywhere pressing the superiority of the homoopathic treatment of disease upon those with whom He, unlike the medical man, can do this he has influence. thoroughly without laying himself open to the charge that he is seeking his own interest. If the homeopaths really believe that by their system pain is diminished, illness shortened, and life is lengthened, they will put their hearts into this work, and they will succeed.

The work of the professional advocate will be rather accessory than chief, probably in furnishing the essay and providing the lecturers, and also, I doubt not, as in times past, contributing to the funds. There is one thing, however, which I think the profession owes the public, and which it only can provide, and that is a guarantee that the new converts shall have acquired a reasonable knowledge of the system they propose to practise. If the British Homosopathic Society would take this matter up. and either by founding an independent Examining Board, or by making an examination in the principles and practice of homosopathy a necessary preliminary to admission to its membership, would establish such a test, it would win the gratitude of the whole homoeopathic body, and immensely increase the importance and influence of the Society itself.

Yours faithfully.

HENRY HARRIS.

#### MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Braithwaite (J.). The Retrospect of Medicine. Vol. 92. (Simpkin, 6s. 6d.)
Carter (Alfred H.). Elements of Practical Medicine. 4th edition. (Lewis. 9s.)
Crockshank (E. M.). An Introduction to Fractical Bacteriology based on the Methods of Koch. Coloured Plates and Egravings. (Lewis. 14s.)
Daiziel (H.). Mad Dogs and Hydrophobis.
Historical Notes, Popular Fallacies, Present State of Knowledge, etc. (Simplin 1s.)

18.)

im. 1s.)

thuthinson (J.). Illusts, of Clinical Surgery. Fasciculus 18. (Churchill. 6s. 6d.)

Lund (E.). Hunterian Lectures on some of the Injuries and Diseases of the Neck and Head, the Genito-Urinary Organs, and the Rectum. (Churchill. 4s. 6d.)

Medical Directory for 1886, including the Leudon and Provincial Medical Directory Medical Directory (Scotland)

ter, Medical Directory for Scotland, etc., etc. (Churchill. 12s.)

Medical Directory for Scotland, etc., etc. (Churchill. 12s.)

Medican (A.). A Treatise on Gout and Rheumatic Gout. 10th edition. (Bail-

lière. 21.)

Pye (W.). Surgical Handicraft. 2nd Edition. (Kimpton. 10s. 6d.)
Ryley (J. B.). Sterility in Women: its Causes and Cure. (Renshaw. 2s. 6d.)
Semple (A.). The Pocket Pharmacopois for 1885, including the Therapeutical Action of the Drugs with the Natural Orders and Astive Principles of those of Vegetable Origin. (Baillière. 3s. 6d.)
Styrap (J. de). A Code of Medical Ethios with General and Special Rules for the Guidance of the Faculty and the Public in the Complex Relations of Professional

in the Complex Relations of Professional Life. 2nd edition. (Churchill.

Tibbitts (H.). How to Use a Galvanic Battery in Medicine and Surgery, etc. 3rd edition. (Churchill. 4s.)
Transactions of the Edinburgh Obstetrical Society. Vol. 10. 8vo. (Oliver and Boyd, Edinburgh.) (Simpkin. 7s. 6d.)

Willson (A. R.). Chemical Notes for Pharmaceutical Students. 2nd edition. Chemical Notes for Baillière. 3s. 6d.)

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Wood (H. C.). A Treatise on Therapeutics, Comprising Materia Medics and Toxicology. 5th edition. Revised and enlarged. (Smith and Elder. 16s.) Wood (J.). Lectures on Hernia and its Radical Cure. Delivered at the Royal College of Surgeons of England in June, 1835. With a Clinical Lecture on Trusses and their Application to Ruptures, delivered at King's College Hospital.
(Renahaw. 4s. 6d.)
Zlemssen (Von). Handbook of General
Therapeutics. 7 Vols. Vol. 4: The
Treatment of Diseases by Climate. By
Dr. Hermann Weber; General Balneotherapeutics. By Professor Otto Leichtenstern. (Smith and Elder. 14s.)

#### SHORT NOTES, ANSWERS TO CORRESPONDENTS, ETC.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester Road, South Kensington, S.W.

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

#### CORRESPONDENTS.

Communications received from Dr. Dudgeon, London; Dr. Wilde, Bath; Dr. Mackechnie, Bath; Dr. Clifton, Northampton; Dr. J. D. Hayward, Liverpool; Dr. Roth, London; Dr. Pullar, Edinburgh; Dr. Chas. F. Sterling, New York; Dr. Galley Blackley, London; Dr. Maffey, Melbourne; Mr. John Hoskin,

Malta; Mr. Harris, London; Mr. K. Cochran, London.

## BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische Zeitung.—Zoophilist. — Medi-Advance.—Monthly Homoeopathic Review. — Revue Homosopathique Belge.—Homöopatische Monatsblätter.-New York Medical Times .-American Homoeopathist .-St. Louis Periscope.—United States Medical Investigator.— Medical Advocate.—Clinique. Medical Visitor.—Chemist and Druggist.—The Homoopathic Journal of Obstetrics.—La Reforma Medica.—The Hobart Mercury.—Calcutta Journal of Medicine. — The Guide. -Hom. Revista Catalana.-Hahnemannian Monthly.-Bibliothèque Homosopathique.—Medical Era.—Boerick Tafel's Bulletin.—Meand Annals. — California Homœopath. — The Clinical Review.—Monthly Journal of Chemistry, Pharmacy, and Medicine.—Homocopathic Physician.—Philanthropist.—North American Journal of Homeopathy.—Schüssler's Biochemical Treatment.—American Medicinal Plants. By Millspaugh. Fascicle III.—L'Art Médical.

#### THE

# HOMŒOPATHIC WORLD.

### MARCH 1, 1886.

#### SHAPING.

We are happy to announce that since our last issue considerable progress has been made. Letters have been received, some privately, and others which appear in our correspondence pages, all testifying to the interest that is taken in the forward movement both at home and abroad. On the main point there is but one opinion in the minds of all the writers—that we should carry our cause to the public without delay. Of course there are differences of opinion as to the best methods to be followed in carrying out our objects. These differences have appeared in the letters of our correspondents, and also in consultative meetings that have been held of the friends and promoters of the advance.

The first great difficulty encountered was in arriving at an agreement as to the name by which our Association should be called. The name chosen provisionally, and announced by ourselves last month—Medical Reform League—met with much favour; but the prevailing opinion seemed to be that homeopathy ought to appear somewhere in the name. The broad foundation and catholic spirit evinced by the neutral title had, and still has, a great charm for many earnest supporters, and we need not say how much sympathy we have with these. At the same time we must confess that we think the arguments in favour of giving the movement a distinctive homeopathic character are of such a nature as to outweigh the considerations against. We strike for Truth and Justice; but the particular truth that is under the pro-

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fessional ban is homoeopathy, and the people who suffer injustice at the hands of the authorities are the homoeopathists. All other systems of medicine—electropathy, hydropathy, etc.—are received and sanctioned by the allopathic profession.

A further consideration in favour of a distinctive homosopathic title is to be found in the fact that our supporters will in any case be mainly, if not exclusively, composed of homosopathists. To have a neutral title would be to sacrifice a good deal of the enthusiasm in our ranks which it is our object to husband and economise.

This much, therefore, may be taken as concluded—that our first object in the work of Medical Reform will be to educate the public on the subject of homeopathy and the treatment it has received at the hands of the dominant section. And whilst we specially call upon all who have experienced the benefits of homeopathy to help us in this work, there is no reason why we should not also ask all lovers of fair play to join us also, whether homeopathic or not. Directly or indirectly there are few people breathing in the civilised world who have not tasted the benefits of homeopathy. To see this we have only to compare the accepted treatment of the allepathists to-day with that practice in the days of Hahnemann, for abandoning which he was subjected to such bitter persecution.

At the present time consultations are being actively carried on as to ways and means; and the (at first very varied) notions of the active promoters of the movement are rapidly taking definite shape. In our next issue we hope to announce the line of action resolved upon. In the meantime we ask all our readers—and, of course, we include ladies in this invitation—to help us by ventilating this question among their friends and acquaintances. We have tried golden silence long enough; and now has arrived the time for talk. To our friends the homocopathic chemists—who have done such excellent work for homocopathy both in this and other countries—we make a special appeal. They have great opportunities of promoting our objects, and we do not doubt that they will use their opportunities well.

## NOTES.

#### INTERNATIONAL HOMOSOPATHIC CONGRESS.

We would again remind our readers of the approaching congress at Brussels about the beginning of August. It is not by any means too early to begin to make necessary arrangements. We hope that this country will be worthily represented; and practitioners will not forget that this is the only congress of the year, as it takes the place of the usual annual congress of British homeopathists. The congress of 1887 is to be held at Liverpool, and promises to be a memorable one.

#### MAJOR VAUGHAN MORGAN'S PRIZE.

THE time is drawing near for the essays to be sent in by those who are competing for this prize. It is expected that there will be a good number of competitors, and we would urge on all those who can write to enter the lists and put out their best efforts. In this way something worthy of our cause will be forthcoming, and medical science will be advanced.

## HOMOSOPATHY AT LIVERPOOL.

WE are rejoiced to see that our Liverpool friends are showing very vigorous signs of life. The Forty-fourth Annual Report of the Homocopathic Dispensaries has just been presented, showing a total of 78,881 patients relieved during the year. The cost of the Hospital has exceeded the original estimate by another £10,000, but Mr. Tate has come forward in the most generous manner and doubled his donation, thus supplying the deficiency. In addition to this, a sum of close upon £3,000 has been collected towards an endowment fund, and the Dispensaries Committee (who will undertake the management of the Hospital as well) appeal to the non-homocopathic as well as the homocopathic public for support. With great force and reasonableness they base their appeal on these grounds:—(1) Because by supporting this Hospital subscribers would be serving the cause of liberty of conscience and of opinion in medicine and science; and (2) because they would thereby be giving the poor a chance of receiving the medical treatment of their choice as well

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as the rich. Liverpool has always taken a leading position in the history of British homoeopathy. We trust that she may play a great part in the homoeopathic revival which we believe we are about to witness before very long.

#### THE REIGN OF LAW IN MEDICINE.

Dr. Dyce Brown has published very opportunely his Hahnemannian Oration of last year, entitled *The Reign of Law in Medicine*. We have elsewhere given a notice of Dr. Dyce Brown's brochure, and need not here do more than call attention to it as a work full of striking facts and arguments, and admirably suited for the work of the new propaganda.

#### RATING OF CHARITIES.

THE movement in opposition to the rating of public charities is growing in strength and volume. A Memorandum has been issued by the "Charities' Rating Exemption Society" setting forth very clearly the present anomalous state of things. If all charities were rated alike it would not be so bad, but some are exempted from rating at all, and others exactly similar are rated. But taxing charities to pay for the maintenance of the poor is simply robbing Peter to pay Paul.

#### THOUGHT READING.

Mr. Stewart Cumberland is at present in India, and our esteemed colleague Dr. Salzer, of Calcutta, sends us two able letters (for which we regret we are unable to find space on account of their length), which he has contributed to the Indian papers, dealing with the subject of "thought reading" as exemplified by Mr. Cumberland. He does not admit of Mr. Cumberland's theory that he reads thoughts through muscular movements. He maintains that it is exactly the same in kind (though far inferior to it in degree) as the communication that the lower animals, and especially insects, hold with one another by touch. He says, truly enough, that properly speaking Mr. Cumberland never reads a thought, but only an impression or an idea.

#### HAHNEMANN ON DOUBLE REMEDIES.

In the Allg. H. Ztg., of 10th November, 1885, Dr. Mossa gives an interesting letter from Hahnemann relative to

Dr. Aegidi's proposal to mix two homocopathic remedies together and administer them thus to the patient, which he said was an improvement on the single remedy plan which Hahnemann had hitherto so earnestly enjoined. The letter is dated Köthen, 15th June, 1833, and runs thus:— "Do not think that I would reject anything good from prejudice, or because it might introduce changes into my doctrine. Truth alone concerns me, and I believe you too. Therefore I rejoice that you have lighted upon such a happy thought but have kept it within necessary bounds: 'That two medicinal substances (in smallest dose or by olfaction) should be given together only in a case where both seem equally homeopathically adapted to the case, but each from a different side.' For this practice is so completely in accordance with our art that no objection can be made to it, but rather homeopathy must be congratulated on its discovery. I shall take the earliest opportunity of employing it, and have no doubt as to its utility. I believe also that two medicines should be given simultaneously—as I give at the same time sulphur and calcarea when I give hepar sulphuris-or sulphur and mercury when I give cinnabar." But this was in direct contradiction to Hahnemann's own doctrine when he said that we could not tell what would be the effect of a combination of medicines from a knowledge of what they would effect singly, and his illustrations of hepar and cinnabar are not to the point, because these medicines were tested in their chemical combination, and the effects they produced were different from those of their separate elements. Accordingly, when the congress of homeopathic physicians met at Köthen on the 10th August, 1833, Hahnemann was persuaded by his disciples not to introduce into the fifth edition of the Organon he was about to publish any recommendation of the double remedies of Aegidi which he had determined to introduce into homeopathic practice. subsequent writings Hahnemann seems to have dropped the idea of employing these mixtures, and we hear no more of The alternation of medicines in rapid succession is the only survival of this temporary coquetting with medicinal mixtures.

#### PASTEURISM.

WE have been requested to state that any member of the medical profession desirous of obtaining information on the

subject of Pasteurism, or other questions relating to vivisection, may obtain the same by applying to Benjamin Bryan, Esq., 1, Victoria Street, S.W.

#### BERLIN HOMOEOPATHIC SOCIETY.

At the forthcoming meeting on March 4th Dr. H. Shackleton will read a paper on A Case of Multiple Sarcomata, Recovery under Homosopathic Treatment. (The patient will be exhibited.)

## ORIGINAL COMMUNICATIONS.

#### CONVERSION OF THE ROYAL COLLEGE OF PHYSICIANS TO HOMCEOPATHY.

[The following letter, sent by Dr. Dudgeon to the authorities of the Royal College of Physicians, sufficiently explains itself. Up to the time of our going to press no answer, by our an official acknowledgment of its receipt, had been received.—En. H. W.]

To the President, Censors, Council and Fellows of the Royal College of Physicians of London.

GENTLEMEN,—Though not a Licentiate, Member or Fellow of your College, I venture to address you on a subject that concerns the medical profession in general and your ancient and venerable institution in particular. As a graduate of the University of Edinburgh I have never sought to interfere with your College in any way, but, as you will presently see, you have attempted to cast a slur upon me and many of my colleagues, some of whom are Licentiates of your College. and this justifies me in addressing you.

You will remember that on the 27th of December, 1881, an extraordinary meeting of your Fellows was held, at which

you passed the following resolution:-

"While the College has no desire to fetter the opinions of its members in reference to any theories they may see fit to adopt in the practice of medicine, it nevertheless thinks it desirable to express its opinion that the assumption or acceptance by members of the profession of designations implying the adoption of special modes of treatment is opposed to those principles of the freedom and dignity of the profession which should govern the relations of its members to each other and to the public. The College therefore

expects that all its Fellows, Members and Licentiates will uphold these principles by discountenancing those who trade

upon such designations." This resolution, taken by itself, does not seem to affect those members of the profession who, like myself, hold that the therapeutic rule enunciated by the illustrious Habnemann expresses a general principle for the treatment of disease by drugs founded on nature and experience. But taken in connection with the speeches delivered by the assembled Fellows at the meeting in question, it is evidently directed against those who accept Hahnemann's rule as a guide to the treatment of disease, though it is of course utterly wrong in attributing to them the assumption of or trading upon a designation. It is you who have given us the name of homeopathist, and you seek to punish us for that which we repudiate. We are physicians, surgeons and apothecaries who make no concealment of our conviction that the homocopathic is the only therapeutic rule that is of general application, and the truth of which is confirmed by thousands of medical practitioners in an experience of more than half a century. Your intended taunt of "trading on a designation" does not therefore apply to us, and your resolution is utterly valueless except as showing your animus against homeeopathy. Your denunciation of "the assumption or acceptance by members of the profession of designations implying the adoption of special modes of treatment" hits only those of your own body who "trade upon designations" as oculists, aurists, gynæcologists, obstetricians, dermatologists, alienists, electricians and so forth. In your hurry to shoot the members of the profession who teach and practise according to Hahnemann's method you have missed them entirely, and brought down only the specialists on your own side. That is to say, you might have done so, only you know very well that your resolution is as impotent and inept as your claim to license all the physicians of the metropolis, which you made a feeble attempt to exercise against the late Dr. Quin in 1833 by threatening him with all manner of pains and penalties unless he submitted to be examined and licensed by you; but which eventuated in your own ludicrous failure. Dr. Quin knew that yours was an idle threat, so he treated it with contempt, and continued to practise as a physician, as though you and your rights and privileges were non-existent. It must be annoying to you

to find that for all your threats and excommunications

"nobody seems a penny the worse."

These are not the only occasions on which you have displayed your unreasoning animosity to homeopathy. In 1851 your President (Dr. Paris) rejected the application of a practitioner who was known to be favourable to Hahne-

mann's system in these becoming terms:

"The foundation of the Royal College of Physicians was for the purpose of guaranteeing to the public skilful and safe practitioners. The College of Physicians regard the so-called homeopathists as neither skilful nor safe practitioners. Therefore the College cannot, without betraying a sacred trust, give its license to persons whom they regard as wholly unworthy their confidence, and with whom it is not possible they can hold any communion." This document shows how you would have treated Dr. Quin had he accepted

your pressing invitation to "walk into your parlour."

On another occasion, viz., during the cholera epidemic of 1854, your President (still Dr. Paris) was appointed with others to report on the results of the treatment of cholera pursued at the different London hospitals. He excused himself from including the results of the treatment of that disease at the London Homeopathic Hospital (then in Golden Square), although it was certified to by a medical inspector of your own school appointed by Government, on the ground that by doing so he "would give an unjustifiable sanction to an empirical practice alike opposed to the maintenance of truth and to the progress of science." As the certified mortality in the London Homeopathic Hospital was only 16.4 per cent., while the average mortality in all the other hospitals was 51.8 per cent., it was patent to all that it was the enormous success of the "empirical practice" compared with the methods you favour that led your President to omit all mention of the Homeopathic Hospital from his report.

But things have altered completely since your united wisdom passed the celebrated anti-homoeopathic resolution of the 27th December, 1881, as I shall now proceed to show.

Last year there was published a book entitled A Text-book of Pharmacology, Therapeutics and Materia Medica, by Dr. Lauder Brunton, who, among his other titles, announces that he is "Examiner in Materia Medica" in your own illustrious College. At p. 1079 to p. 1118 you will find an "Index of Diseases and Remedies," which contains a

great number of remedies for diseases which must appear to you very strange. It would occupy too much space to enumerate all the unusual therapeutics of this remarkable Index, so I shall content myself with a selection. Dr. Brunton tells us that Abscess is to be treated with small doses of Calcic Sulphide; Acidity with Pulsatilla; Albuminuria with drop doses of Cantharis; Amaurosis and Amblyopia with minute doses of Ruta; Amenorrheea with Ignatia and Pulsatilla; Apoplexy with Aconite; Asthma with Arsenic and Ipecacuanha: Bilious Headache with Bryonia: Irritable Bladder with Cantharis; Blepharitis with Pulsatilla; Bronchitis with Aconite and Arsenic; Bruises with Arnica; Boils with Arsenic and Sulphides; Acute Nasal Catarrh with Arsenic, Camphor, Nux Vomica, Potassic Iodide and Pulsatilla; Cerebral Congestion with Aconite and Belladonna; Chlorosis with Cocculus; Cholera with Arsenic, Camphor, Copper Salts and Veratrum Album; Colic with Arsenic and Cocculus; Condylomata with Thuja; Conjunctivitis with Belladonna, Euphrasia and Mercury; Constipation with Hydrastis and Nux Vomica; Infantile Convulsions with Aconite, Beliadonna and Ignatia; Cough with Pulsatilla; Cystitis with Cantharis and Turpentine; Delirium with Belladonna and Opium; Delirium Tremens with Belladonna, Cannabis Indica, Hyoscyamus, Opium and Stramonium; Diabetes with Arsenic and Phosphoric Acid; Diarrhea with Arsenic, Corrosice Sublimate, Dulcamara, Pulsatilla and Rhubarb; Diphtheria with Belladonna, Bromine, Iodine, Cyanide of Mercury and Bichromate of Potash; Dropsy with Arsenic and Bryonia; Dysentery with Arsenic and Corrosive Sublimate; Dysmenorrhea with Pulsatilla; Dyspepsia with Arsenic, Bryonia, Ipecacuanha and Nux Vomica: Dysuria with Cantharis; Earache with Pulsatilla; Eczema with Mercury, Rhus Toxicodendron and Viola Tricolor; Endocarditis with Aconite and Bryonia; Enteritis with Arsenic; Enuresis with Cantharis, Rhus and Turpentine; Epididymitis with Aconite and Pulsatilla; Epistaxis with Aconite, Arnica and Hamamelis; Erysipelas with Belladonna and Rhus; Fever with Aconite, Gelsemium and Rhus; Gastralgia with Arsenic and Nux Vomica: Gastritis with Arsenic and Pulsatilla: Gonorrhea with Cannabis and Pulsatilla; Hæmatemesis and Hæmoptysis with Hamamelis and Ipecacuanha; Hæmorrhage post partum with Achillan, Hamamelis and Ipecacuanha; Hamorrhoids with Nux Vomica and Sulphur; Headache with Aconite, Belladonna, Bryonia, Chamomile and Nux Vomica; Heartburn with

Nux Vomica and Pulsatilla; Herpes Zoster with Dulcamara and Rhus; Hypochondriasis and Hysteria with Ignatia; Inflammation with Aconite, Arnica, Belladonna, Bryonia and Pulsatilla; Laryngitis with Aconite and Iodine; Mania with Belladonna, Cannabis Indica, Hyoscyamus and Stramonium; Mastitis with Phytolucca; Measles with Aconite and Pulsatilla; Melancholia with Ignatia; Meningitis with Aconite, Belladonna, Bryonia, Hyoscyamus and Pulsatilla; Menorrhagia with Cinnamon, Hamamelis, Ipecacuanha and Sabina; Myalgia with Arnica and Cimicifuga; Nausea with Ipecacuanha (one-drop doses) and Pulsatilla: Nephritis with Cantharis and Turpentine; Nervousness with Ignatia; Neuralgia with Aconite, Belladonna, Chamomile, Cimicifuga, Gelsemium, Ignatia, Nitro-Glycerine, Pulsatilla and Staphisagria; Ozena with Gold; Pericarditis and Peritonitis with Aconite and Bryonia; Pharyngitis with Belladonna; Pleurisy with Aconite and By yonia; Pneumonia with Aconite, Bryonia and Phosphorus; Prostatitis with Cantharis; Rheumatism with Aconite, Bryonia, Cimicifuga and Rhus; Scarlet Fever with Aconite and Belladonna; Spinal Irritation with Belladonna, Cocculus and Ignatia; Sprains with Arnica and Rhus; Synovitis with Aconite, Bryonia and Pulsatilla; Sore Throat and Tonsillitis with Aconite, Apis, Belladonna, Mercury and Phytolacca; Toothache with Aconite, Belladonna, Bryonia, Chamomile, Coffee, Gelsemium, Mercury, Nux Vomica, Pulsatilla and Staphisagria; Typhoid Fever with Arnica, Arsenic, Bryonia, Phosphorus and Rhus Toxicodendron; Vomiting with Arsenic, Bryonia, Cocculus, Ipecacuanha, Nux Vomica, Pulsatilla, Tartar Emetic and Zinc; Wounds with Arnica and Calendula, Yellow Fever with Aconite, Arsenic, Bryonia, Ipecacuanha and Nux Vomica.

Many of these medicines must be unfamiliar to you, as they are not to be found in the pharmacopæia of your school, such as Bryonia, Pulsatilla, Nitro-Glycerine, Euphrasia, Gelsemium, Hamamelis, Cyanide of Mercury, Ignatia, Achillea, Gold, Calendula, Cocculus, Apis, Phytolacca, Thuja, Staphisagria, Cimicifuga, Rhus Toxicodendron and Viola Tricolor: the others are strange in their therapeutic employment as given in this Index.

Now all these novel remedies (i.e., novel to you) and novel applications of old remedies are common and well-known instances of homeopathic therapeutics, which you will find in any manual of homeopathy. Dr. Brunton, in the "Bibliographical Index" at the end of his work, with a delicacy

peculiarly his own, omits to give the sources whence he has derived his information as to these peculiar applications of remedies, and gives no reference whatever to his authority for any of the medicines strange to your pharmacopæia I have italicised in the above list. I may be permitted to supply this omission by informing you that you will find all these novel remedies and all these novel applications of old medicines in Dr. Hughes's Manual of Pharmacodynamics, the fifth edition of which is on the point of being published, which I have no doubt you will all hasten to buy now that homoeopathic treatment has been formally introduced into general medicine, with your own sanction apparently, for it is done by your own chosen Examiner in Materia Medica, who of course would not have done this unless he had been quite assured of your approval. It would have been better had Dr. Brunton given his authority for the homeopathic treatment he recommends, but perhaps he was deterred from doing so as it might have been "an eyesore and annoyance to many of his readers," as his publishers, with his approval, told me the advertisement of a homocopathic work in his own periodical The Practitioner would be. But no doubt you will intimate to him your wish that he should give his authorities in his next edition. You will remember that at your extraordinary meeting in December, 1881, Dr. Bucknill, who, to use your own courteous and refined language, "trades upon the designation" of "alienist"—vulgo: "maddoctor," and was consequently not pleased with your famous resolution, proposed as an amendment what still, as then, expresses a truth, viz., "That no competent medical man" (meaning, of course, no member of your College) "can honestly practise the so-called homosopathic system," for undoubtedly it can hardly be considered honest to practise any system and conceal the source whence you derive your information. But when you have instructed your Examiner to mention his authorities for the homocopathic treatment he recommends, and when he has complied with your instructions, then Dr. Bucknill and every Fellow, Member, and Licentiate of your College, and even your President and Censors, may "honestly practise" according to Hahnemann's method.

Now that your illustrious College, through your own chosen Examiner in Materia Medica, has, as I have shown, openly and publicly adopted the homosopathic treatment, it surely owes an apology to those members of the profession

who have been so long endeavouring in vain to induce you to do this, for its insolent behaviour to them for their endeavours to extend the benefits of the treatment to the sick and to spread a knowledge of homeopathy among the medical profession. But of course we all know how difficult it is to make any body of men apologise for any wrong they have committed, and this difficulty amounts to an impossibility in the case of a body of men belonging to a profession which has always laid claim to infallibility. So we will not be stiff about the apology. But now that you have made this public profession of homeopathy through your Examiner, you will no longer wish to deprive yourselves of the advantage of calling into consultation, as long as the homeopathic treatment is a novelty to you, those members of the profession who have made homeopathy a study and have practised it for many years; so doubtless you will hasten to efface from your by-laws the resolution you solemnly passed in 1881, for though it was meant to discourage consultations between partisans of the two schools, it has proved perfectly futile and nugatory, as I do not suppose any of your body desired to consult with us as long as you denounced homeopathy without knowing anything about it; and I can answer for it that no doctor of my way of thinking in therapeutics has ever felt the slightest wish to have the opinion of any of your learned body on any therapeutic matter. But your resolution, having been intended as a condemnation of those who had studied and approved of Hahnemann's method, is an anachronism and an absurdity now that you advocate homeopathic treatment through your Examiner's Text-book, and you will of course be anxious to expunge it from your statute book. objection of your present President (Sir W. Jenner) "to consultations with homoeopaths because they were not for the good of the patient "will fall away now that homeopathy is approved by you, and he will be anxious, when treating his patients on the system you have adopted, to have the assistance of some member of the profession who has had greater experience of it than himself, for he will thereby be doing all he can "for the good of the patient." Sir Andrew Clark, too, who on the same occasion stated that any one of his school who held a consultation with a physician skilled in the practice of homeopathy "was guilty of an immoral act," will be relieved to find that he can now do so without sinning against morality, since the College

he ado rns has given its imprimatur to the system of Hahnemann.

"A new epoch, a turning-point in the history of medicine," as the Medical Times and Gazette with its dying breath wisely said, has been inaugurated by Dr. Brunton's book. Dr. Branton, in his quality of your Examiner in Materia Medica, will of necessity conduct his examinations of candidates for vour licence on the lines of his Text-book, and will of course inexorably reject any candidate who should show himself ignorant of the power of Bryonia to cure pleurisy, pneumonia and rheumatism, of Euphrasia to cure conjunctivitis, of Pulsatilla to cure amenorrhosa, dysmenorrhosa, epididymitis and acidity, and so forth. Your licentiates henceforth, under Dr. Brunton's fostering care, will have to prove their practical acquaintance with that system which hitherto in your blinded ignorance you have been denouncing as unscientific, irrational and empirical, and you will have to abandon at once and for ever your cherished habit of arrogating for the methods you have hitherto employed the title of the only scientific, rational and legitimate ones. Now that you have legitimated the system of Hahnemann by the Text-book of your chosen Examiner, you will naturally be anxious to obtain the assistance of those who are most familiar with it, and I can assure you that the adepts in homeopathy will not refuse to give you all the aid in their power to cure your patients by its means, for we are too good-natured to bear malice for past offence. Your late repentance condones your previous unworthy conduct, and we are too anxious to aid you in giving your patients the benefit of the scientific therapeutics we have so long advocated and practised, to hold aloof from your advances towards an acknowledgment of the truth in therapeutics the medical profession and the world owe to the genius of the immortal Hahnemann.

I have the honour to be, Gentlemen,

Your obedient servant,

R. E. Dudgeon, M.D.

53, Montagu Square, London, W. 8th February, 1886.

VASCULAR DEAFNESS.—We have in the press an article on this condition, first described by Dr. R. T. Cooper, but are obliged to hold it over until next month.

#### APIS AND DIPHTHERIA.

By GEORGE W. WINTERBURN, M.D., New York.

On the morning of December 30th last I was asked to see a little girl about seven years of age who had been for four days under the care of another homeopathic physician, from whom she had received various remedies without benefit. I arrived at the house shortly after noon, and found the patient to be a delicate, nervous, fair-complexioned child, with blue eyes and very light brown hair. Her mother told me that she was very sensitive to diseases, and took everything that came along. The child's face had a peculiar ashy look, the eyes dull and the lids drooping, the expression of the countenance stupid; in fact, the whole appearance of the face was as of one under the influence of an opiate; but she had had nothing of the sort. The lips were dry and pale, and the only evidence of mental activity about the child was a constant picking at the little bits of half-detached threads of cuticle thereon. The tongue was soft and flabby, but not much, if any, swollen, and covered for the most part with a dirty, greyish mucus, through which the enlarged papillæ protruded, giving the tongue a peculiar dotted appearance. The edges and the tip of the tongue were denuded, and the papillæ here also were quite swollen; but while this part of the tongue looked sore she said it did not feel sore. tonsils were somewhat swollen, but were not tender to the touch, as I made considerable pressure over them without causing her to flinch. The pharyngeal membrane was much swollen and very red; not the dusky turgid red we see so often in the diphtheritic throat, but like the blush on a fair girl's cheek. The throat looked very painful, but she said then, as she had said all through her sickness, that it was not at all sore. Though this seemed incredible, and was doubted by the physician who had been attending her, there was some corroborative objective evidence. In the first place there was none of that empty swallowing so usual when the throat is sore; pressure on the outside caused no discomfort: she moved her head and neck freely and naturally; she drank milk and ate bread and milk (I sent for both in order to test her powers of deglutition) without an effort, and evidently without pain; and she permitted the free use of the tongue spatula without a murmur. I was, therefore, forced to admit, when she said that her throat was not sore, that she both understood the question and replied truthfully; still it did look very sore. That she was able to eat and drink without discomfort, and without a particle of unnatural effort, seemed marvellous, when the ulcerated condition of the throat was perceived. I have said that the throat tissues were very red. So they were as far as they could be seen. But for the most part they were covered with a yellowish, feetid exudation. This false membrane was especially thick over the tonsils, where it stood up in two huge raggedlooking chunks, apparently a quarter of an inch thick. I have seen a great many diphtheritic throats, a great many worse ones than this, but never one just like it. The membrane extended over the palatine arch and into the posterior nares, causing breathing like the "snuffles;" the nose was stopped and dry. The back part of the pharynx and the floor were almost free of membrane, and it was here that the tissues could be seen to be so highly injected. Although there was evidently considerable congestion of blood to the parts there was no bleeding, not even when pieces of the membrane were detached and hawked up.

The voice was extinct. She replied to inquiries by nods and shakes of the head, and when forced to talk the effort resulted in a murmur without vocality; still she said that talking did not hurt her. She had a cough like the bark of a dog; and she coughed frequently and severely, causing symptoms of exhaustion and asphyxia. This had led the previous doctor to give Kali Bichromicum, without any benefit. The cough, though harsh and croupy, was not occasioned by tracheal involvement, as was shown by percussion. There was no expectoration. The cough began without warning, continued until suffocation seemed impending, and then suddenly ceased. Appetite was torpid, though the stomach did not seem to be otherwise disturbed. When offered milk or other liquid she would take a little sip, but she was neither hungry nor thirsty; the only thing she craved was ice-The bowels were constipated, and the urine practically suppressed; that is, she passed a little dark red, but not lateritious, urine once a day. She had no headache, no pain in the back or extremities, and the only pains of which she spoke (and of both of these she had complained voluntarily) was in the mastoid process, or rather just below it, in the angle behind the ear, and a fixed pain in the abdomen, just above the angle of the crest of the ileum, about two inches from it in a line toward the umbilicus; pressure over both these places produced no evidence of suffering, but she

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claimed they hurt her all the time. The skin was dry and harsh; the feet swollen, but not ædematous; the temperature 102.7° Fahr.; the pulse 140; arterial tension sub-normal; respiration 30 and shallow. The whole system seemed torpid and oppressed, even the disease did not seem able to make rapid headway. If held in the arms, the only position in which she had ease, she would lie in a stupid half-coma, from which she was aroused only by the fits of coughing. When laid upon the bed a new series of phenomena developed. She would soon begin to breathe heavily, turn restlessly from side to side, cough, and finally rise up suddenly as if suffocating, with a frightened, anxious expression of the countenance. Then she would cry to be rocked. If this was granted she would at once go off into a stupid sleep, and on being laid down the above procedure would again be gone through with. All her symptoms were manifestly worse after nightfall.

As I listened to the various symptoms, pictures of Lachesis, Arsenicum, Mercurius, Hepar, Ammonium Carb., Baptisia, and Apis floated through my mind. I banished Arum and Ailanthus at once on account of the slow progress of the disease. Lachesis and Arsenicum corresponded to the asthenia. but there was none of the restlessness, thirst, and clamminess of skin of the latter, nor livid colour of the pharynx, intense pain in throat, aching all over, and aggravation after sleep of the former. Still Arsenicum has the starting up in bed, the suffocation, the kidney disturbance, and some of the other symptoms of the case, besides the depressed vitality, and Luchesis has the dread of hot drinks, a symptom which I forgot to mention in its proper place. The cough was so like the Hepar cough that if I permitted myself to alternate I surely would have given this as one of the remedies, especially as Kali Bichromicum had been given by Dr. T. without result. Baptisia also was ruled out for the same reason. although the semi-comatose condition, the thirstlessness, the absence of pain, the depressed vitality, and the nocturnal exacerbation made this not a bad prescription. It certainly was roughly homeopathic, and in the potency in which it was used, 2x, should have shown some controlling power. Perhaps it was rendered nugatory by the Kali that was alternated with it. When homoeopathic doctors learn to prescribe homoopathically (i.e., the single remedy) they will have less reason to wonder why remedies fail to act.

I felt very much like giving Mercurius Cyanuretum, both because it is such a good general remedy in diphtheria (a

very unhomeopathic reason), and because all the mercurials act so well in ulcerations of the pharynx. They are not useful in those cases of rapid prostration in which Ailanthus, for instance, is such an efficient remedy, but when the disease ambles instead of gallops, reaching at last the same excessive prostration by a slower route, the Salts of Mercury are not to be forgotten with impunity. The Cyanuret has been a good friend to me, and I never neglect it in diphtheria without ample warrant. In this case it was indicated by the involvement of the posterior nares, by the voicelessness, by the nocturnal aggravation, by the dry, burning skin, and other symptoms; still the claims of Apis were knocking so loudly for recognition on my sensorium that Cyanuret did not have a fair chance. Ammonium Carb. I did not give a second thought to, although it has that peculiar symptom so alarming to the mother in this case—"the patient is aroused by want of breath every time he falls asleep."

By that subtle intuition which every close prescriber learns to recognise, Apis kept ringing in my ear, and when the mother, probably a little disgusted with my many questions and slow procedure, turned to me somewhat sharply with, "Can anything be done for my child?" I replied with a confidence born of hope and experience, "Yes, it can be saved." That Apis was homeopathic to the case is shown

by the following correspondences in its pathogenesy:

Tension behind and under the ears; piercing, tensive pain behind the ear; stitches under the ear.

Entire stoppage of the nose; dryness of the nose.

Paleness of the face; the countenance assumed a pallid, deathlike look.

Dryness and desquamation of the lower lip; the lips are dry.

Rawness along the edge of the tongue [very painful].

The whole margin of the tongue feels as if scalded, as if quite raw. [Note.—In this case it looked raw, as if it had been scalded, but was painless.]

In the mouth, on the inner cheeks, fiery redness; red, fiery appearance of the buccal cavity [with painful tender-

Pharyngeal membrane of a bright red colour.

Dirty grey exudation on membrane. Not much pain, except in the ears.

Small amount of pain accompanying intense and extensive inflammation; thirstlessness.

No thirst, with heat.

No appetite nor desire for food, though it was not repulsive to him.

Pain in the abdomen from the hip towards the umbilical region.

Deep within, below, and beside the right hip, sensation of

soreness.

Slow, throbbing, boring pain over the crest of the ileum.

Constipation; no stool for a week.

The previously very scanty urine diminished to one-half [with a violent burning sensation when urinating, as if scalded].

Speaking is painful; she feels as if it wearied the pharynx. [Note.—My little patient avoids speaking in every way possible, answering by nods, shakes, and gestures. At the early part of illness the voice was hoarse, but now extinct.]

She grows hoarser; hoarseness and difficulty of breathing;

hoarseness, with dryness of the throat and no thirst.

Severe cough, especially after lying and sleeping; hoarse cough with evening heat; cough prevents sleep after lying down, and wakens him; cough with starting in sleep; cough ceases as soon as the least particle is loosened, which is swallowed; there is no expectoration.

Dyspnœa; it seemed impossible to breathe, had to fan him to keep him alive; great feeling of suffocation, it seems as if she could not long survive for want of air; difficult, anxious breathing, worse when lying; suffocation in the throat, worse in a horizontal position; laboured inspiration, as in croup.

Nettle-rash in the back of the neck. [Note.—My little patient had a red rash on the back of the neck, but whether this was pathognomonic, or the result of the fat strip of bacon wrapped round the throat, I know not. It was noticeable, however, that while the strip of bacon went entirely round the neck the rash was only confined to the portion just below the scalp.]

Swelling of the feet; sensation in the toes and in the whole

foot, as if too large, swollen, and stiff.

Terrified starting during evening sleep; anxious starting in sleep, with cough.

A constant feeling of lassitude and great prostration.

Great desire to sleep, amounting to most extreme sleepiness.

Aggravation of most of the above symptoms in the evening

and at night.

I gave Apis 6, ten drops in half a glass of water, two teaspoonfuls every two hours. I also ordered a gargle of alcohol and water (1 to 4) in order to wash out any detachable pieces of membrane, and prevent them from being swallowed. Absolute cleanliness (without disinfectants) was provided for, and a milk diet ordered. I saw her in the evening. There was no material change.

December 31st.—At nine in the morning the temperature was 101.6° Fahr., a fall of one degree since the previous day; pulse 120, weak and quavering; respirations 28, and deeper and fuller than yesterday. Had had a very much better night than at any time since sickness began. The cough no longer harsh and croupy, but more like that from an ordinary cold. The nose begins to run a little. The complexion less ashy, but the throat looks about the same. She is still voice-less, listless, and inclined to sleep. Apis continued every three hours.

In the evening temperature 101° Fahr., and all the other symptoms alleviated in about the same ratio. Has taken milk and oatmeal gruel freely. Urine a little better, but still scanty. Tongue quite clean, and no longer looks sore. Feet not swollen; pain behind ear and in abdomen gone. Has

not coughed since morning.

January 1st.—The little patient has had a very good night. No longer suffocated; does not start up in sleep; no cough; voice has returned; throat very much better, but still looks very nasty; diphtheritic membrane lighter in colour, and thinner and dryer in appearance; tongue, buccal membrane, and lips of a natural colour; nose runs a clear water; eyes brighter, and the facial expression intelligent. Appetite fairly good, but not ravenous; when I went into the room she was sitting in a rocking chair eating an apple. Skin feels natural and cool. No fever, but the pulse is too quick (110), and very weak.

In the evening I found the child sleeping quietly, having passed a comfortable day. Temperature normal, but the pulse

very weak.

January 2nd.—The little patient slept quietly all night without awaking. She had for breakfast this morning a saucer of catmeal and milk, and is lively and bright. Throat still looks very sore, but the diphtheritic membrane is shrivelling. Temperature is 99.2° Fahr., an unexpected and unex-

plained rise, as in all other respects she is better than yester-

day, when temperature was normal.

January 3rd.—Called at two o'clock, and found the little patient bright and playful. Throat nearly well. Appetite excellent. Bowels have moved naturally. The temperature, however, was 99.7° Fahr., indicating a forming inflammation, which an examination of the urine showed was in the kidney. The urine was yellowish-red, with but moderate sediment. The heat and nitric acid test showed 4 per cent. albumen. The microscope revealed hyaline and granular casts, and tesselated and spindle-shaped epithelium. I hesitated whether to change to Hepar or continue with Apis, but concluded to not make any alteration in the medicine given, as with this one exception the case was doing beautifully, and even here the disturbance was moderate compared to what is frequently seen in these cases, and there was no evidence of dropsical tendency. One of the most notable advances made during the past twenty-four hours was the improvement in the condition of the heart, which now seemed in rhythm and rate to be very nearly normal.

January 4th.—The patient is so well that I dismissed the case, with careful instructions as to the avoidance of draughts,

excitement, or improper food.

## REMEDIES FOR HYDROPHOBIA.

By R. E. Dudgeon, M.D.

In the Daily Chronicle of 24th December last we read :-

"The following notice of a remedy for hydrophobia has appeared in a Russian paper, signed by 'Le Savant Conseiller Ceroschin':-'In a village called Sakorotodewo, in the province of Jula, lived an old soldier, who was reported to me as having often cured people and animals who had been bitten by mad dogs. On making inquiries I found that he grated an onion-shaped root, put the powder on a slice of bread-and-butter, and in that way administered the remedy to his patients. Although I was assured that this remedy never failed, I did not put much faith in it until an accident gave me the means of verifying the statement I had received. A hound belonging to my brother, who lived with me, went mad and bit a gamekeeper. The wound was immediately cauterised, it healed, and we thought no more about the matter. At the end of a few weeks, however, all the symptons of hydrophobia appeared, and the keeper appeared so violent that we were obliged to put him under restraint. There being no doctor near us, I suggested taking the keeper to the old soldier, who gave him two doses of his remedy, one at night and the other next morning, after which all restraint was removed and the patient

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brought home. He was very weak, but had no further attack of hydrophobia, and after a few days was quite well. He lived with us for eighteen years after this, and never had the smallest sign of a recurrence of the disease. The old soldier told us he had learnt the secret of the cure from a peasant of Archangel. The plant he used was the alisma, or water plantain. It flowers during the summer, and should be collected during the month of August. The roots must be dried and grated, and used as directed above. Two or three doses are enough to cure hydrophobia in its acute stage, either in men or animals, and the remedy may be used even for the mad dogs themselves. During the twenty-five years that this herb has been employed it has never failed, and the province of Jula can produce a large number of instances of the cure having been effective."

The alisma plantago, or water-plantain, is no new remedy for hydrophobia. It has long been a popular remedy for that disease in Russia, and was also given to cattle which had been bitten by rabid dogs as a preventive. We learn from Merat and De Lens's Dictionnaire de Matière Médicale that it was much used in Russia about 1827, that Dr. Martins says he had found it efficacious in upwards of 100 cases. The dose was one large root or two or three small ones reduced to powder. Previous to this Dr. Lewshin had vaunted the antilyssic virtues of the plant. Burdach published a cure of hydrophobia by means of it. He gave two and a half drachms per diem, and applied a poultice of the leaves to the bite. Dr. Moser, of Leipzic, administered it successfully as a preventive to a young girl who had been bitten by a dog, two of whose sisters had died of hydrophobia from the bite of the same dog. On the other hand, a commission appointed by the Paris Academy of Medicine to inquire into its efficacy pronounced against its reputed power over the disease. At this period the newspapers were filled with enthusiastic accounts of the curative powers of the alisma in hydrophobia.

History repeats itself in this as in other matters, and the mostrums for hydrophobia which have been lauded and again fallen into oblivion would form a very long catalogue. In Hahnemann's Lesser Writings will be found two admirable papers on hydrophobia which might be profitably read by those enthusiasts who are crying up the infallible virtues of Pasteur's inoculations for this disease. It is one of the most difficult things to determine the actual value of any proposed remedy for hydrophobia, as Hahnemann well points out. In the first place many dogs are reported mad who are not really affected with rabies, and whose bites may be painful and disagreeable but not dangerous. Some years ago I had

a young dog who was born in the house and was extremely docile and affectionate to me. One day I wished to lift him up, as I was in the habit of doing, but instead of allowing me to do so he ran away, and took refuge under a chair, and when I put my hand towards him he bit it most unmercifully in half a dozen places, making the blood flow from every Some people might have thought that the creature had gone suddenly mad and had him there and then killed, their own wounds cauterised, and lived for months after in terror of an attack of hydrophobia, and if they had taken alisma or got "vaccinated" by Pasteur they might have published their case as a testimonial to the efficacy of the nostrum they had tried. I did not kill the dog nor cauterise my wounds, and I soothed my dog, which I concluded had been frightened by something to cause him to behave in such an unusual manner. I did not get hydrophobia, and my dog soon regained his affectionate disposition. Again, many persons may be bitten by a really rabid dog, and only a small proportion of them may receive the infection of hydrophobia. This may easily happen if the bite is inflicted through the clothes, which may retain the saliva, so that the dog's teeth are clean when they enter the flesh, or the bitten person may be insusceptible to the virus. Thus Vaughan (cited by Hahnemann) saw from twenty to thirty persons bitten by a mad dog, of whom only one had hydrophobia, the rest escaping unharmed. Again, several cases are on record where after the bite of a mad dog hydrophobia was developed, and yet the patients recovered without anything having been done for them in the way of remedial measures. twentieth volume of the Philosophical Transactions contains several cases of this description. Thus it is impossible to say whether a prophylactic is efficacious after only two or three weeks, or even months, of observation. A case of hydrophobia was recently published by Dr. Dujardin-Beaumetz in which the disease only appeared eighteen months after the bite.

All these peculiarities respecting hydrophobia should render us extremely cautious about accepting the statements published in the papers about the infallible efficacy of Pasteur's method for the cure and prevention of hydrophobia. There is no evidence to show that his so-called "vaccinations" with the spinal cord of rabbits inoculated with the hydrophobic virus have any effect whatever on human beings, though there is some suspicion that they may

convey the disease to persons who might otherwise not have taken it.

In the Spectator for the 26th December last Dr. Anna Kingsford has a letter in which she tells us that a little girl aged ten was bitten by a rabid dog on October 3rd. six days afterwards she, being apparently quite well, was "vaccinated" by Pasteur for ten successive days. Fifteen days after this she was seized with hydrophobia, and though she was again vaccinated with the rabbit-virus, she died in three days with terrible convulsions. In this case either the prophylactic was powerless or Pasteur's "vaccination" caused In either case Pasteur's method was the fatal disease. utterly inefficacious as a prophylactic. Another case that proves the inutility if not the hurtfulness of Pasteur's treatment was that of a dog that had never been bitten, but whose mistress, being desirous of preventing bad consequences should it hereafter be bitten by a rabid dog, took it to Pasteur and had it treated according to Pasteur's wellknown method, but a fortnight afterwards, as it seemed to be ill, she took it to a dog-doctor, who pronounced it affected with rabies and ordered its immediate destruction. These two cases ought to settle the Pasteur delusion with regard to a cure for hydrophobia or a prophylactic against the disease, but probably Pasteur will go on yet for a time practising his useless and dangerous "vaccinations," and he will continue to receive a certain amount of encouragement from doctors and others who have committed themselves too deeply to the acceptance of Pasteur's doctrines to allow them to recant their outspoken opinions now that the bubble has If Pasteur does not soon stop his "vaccinations" on human beings, doubtless the Government will have to interfere for the protection of its citizens.

The history of all the vaunted prophylactics for hydrophobia is very much alike. A new remedy is proposed (or an old one revived, as in the case of alisma), hundreds of cases of persons bitten by dogs supposed to be mad, but most or all of which were probably only bad-tempered or frightened, have taken the supposed prophylactic and not taken the disease. Enthusiastic gobemouches go about proclaiming the wonderful efficacy of the new remedy, until at last one poor fellow, who had been plied with the prophylactic and had in consequence neglected all other precautions, is seized with hydrophobia and dies in horrible agony. Of course reasons are as plentiful as blackberries to account for

this failure—but one failure is as good as a hundred, the much bepraised remedy is discredited, and shortly retires into oblivion, to be perhaps resuscitated when the history of its previous failure has been forgotten. It is again lauded, it again proves a failure, and is finally consigned to the

tomb of the Capulets, where requiescat in pace!

Pasteur's prophylactic differs from others in this, that it seems to be capable of conveying the very disease he intends to preserve people from. Pasteur says he does not pretend to cure hydrophobia when fully developed by his method, but only to prevent those bitten by rabid animals getting the disease; but Hahnemann says with truth, "There cannot be any prophylactic of hydrophobia that does not prove itself to be a really efficacious remedy for the fully-developed hydrophobia." Pasteur's "vaccinations" have failed to prevent or to cure the disease, therefore they should be finally given up.

Whether Dr. Buisson's cure for hydrophobia by vapour baths will prove more successful than Pasteur's prophylactic, the alisma cure, the meloe-majalis cure—which the Prussian Government purchased from its inventor at a high price after its efficient had been testified to by a commission of experts—or the thousand-and-one other nostrums which have had their day, is what time must decide. I confess the announcement that Dr. Buisson has cured or prevented hundreds of cases where the subjects of his treatment had been bitten by dogs supposed to be mad, makes me distrust the efficacy of his method, it bears such a striking resemblance to the history of other infallible nostrums for the disease. What we want to see is the cure of half a dozen undoubted cases of hydrophobia occurring after the bite of a dog undoubtedly affected with rabies; for there are authentic instances of what is called hysterical hydrophobia on record, due entirely to the influence of the imagination excited by panic terror, which may even terminate fatally, though they generally recover. From a case recently published by Dujardin-Beaumetz it would appear that real hydrophobia may occur spontaneously in the human being without any bite from a dog, rabid or otherwise; this spontaneous disease terminating fatally, and inoculations from the man causing rabies in animals.

On the whole, I am inclined to think that the recent police order in London requiring all dogs to be led or muzzled in the street is a most sensible plan for preventing the disease. A well-made wire muzzle is no inconvenience to the dog, and the London plan is infinitely superior to that adopted by the Manchester authorities, who forbid the appearance of dogs in the street whether muzzled or led. Nothing is more fitted to make dogs ill and probably susceptible of the disease.

#### CLINICAL RECORD.

LONDON HOMEOPATHIC HOSPITAL.

Cases under the care of Dr. CLARKE.

#### CASE I.

#### NEURALGIA—CURED—Gelsem.

EMILY J., married woman, thirty-three, pale, spare, rather gaunt-looking, left internal squint from childhood. Admitted December 30th, 1844, complaining of severe pain in the head, which she had had for two months. Had an attack before, but not so bad as this. The pain is at the top of the head, and it runs along the sides of the head and face like hot wires. It lasts a long time. She feels sick with it, but does not vomit. In the last three weeks has had giddiness as well. It comes when the headache is on, and she is afraid of falling on the fire; almost loses herself for a second; the sight grows dim. Rolling a shawl round the head relieves for a time. The pain is worse after eating. Sleep bad; tongue tremulous and red, a little coated. Has been a great tea-drinker. Catam. reg., scanty, pale. The temperature rises a little at night.

She received Gelsem. 1, one drop every three hours. The pain at once abated; she slept better the first night. The pain was sharp at times, but did not last so long. On January 6th she complained of dull pain on the left side of the face; and on the 7th of numbness and coldness in both arms. On the 8th she had a bad attack in the night but was better in the morning, and felt much stronger. On the 12th complained of some pain in the shoulders, and on the 14th Bryonia 3 was given in alternation with Gcls. She steadily improved, and left quite well on the 21st.

#### CASE II.

NEURALGIA OF ANTERIOR CRUBAL NERVE—CURED—Gelsem.

ALFRED B., twenty-three, painter. Admitted July 1st, 1884, complaining of pain down the front and inner side of the left leg. For seven years had been subject to attacks of this kind. The last he had was eight months before. As a rule they lasted two or three weeks.

The present attack had lasted nearly a month; it came on suddenly one night, and the following morning he was unable to move. Kept in his bed a few days. The pain has continued ever since. Never had rheumatic fever;

never had lead colic; has been a painter ten years.

The pain goes up to the iliac crest and down to the knee on the inner side; between these points there is great tenderness. The pain is sharp and catches him by jerks. Every movement causes it; and he sometimes has it when quite still. There is tenderness behind the great trochanter. The pain is very bad on walking; tongue, yellow fur; bowels inclined to be constipated; sleep bad on account of the pain, and he can't set his foot to the ground well.

He received Gelsem.  $\phi$ , two drops three times a day. He soon began to improve. On the 4th got out of bed with much less difficulty than before. He left on the 15th, able

to walk quite well.

#### INDIGO IN HEADACHE.

By Dr. Dudgeon.

A LADY who came to me for quite another affection told me that at one time she was very subject to a peculiar headache, which tormented her for years, and for which she tried all sorts of remedies and consulted many doctors. The attacks of her peculiar megrim commenced with a pain in the right outer ankle, which soon gave place to one in the right knee; thence it seemed to leap directly to the head, and was general over the head. The peculiar sensation in the head was as if the brain was frozen, so much so that she felt inclined to bring the head close to the stove pipe in order to melt the frozen brain. This headache would last for many hours, or even days, and was attended by sickness and inability to take any food, At last a doctor in Halifax, N.S., said, after studying the character of her head-ache for some time, "I feel sure I know what will cure you." The medicine he hit upon was Indigo, a dilution of which he prepared himself and gave her. A very few doses completely cured the headsche. Years have elapsed since then, and she has never felt it again.

#### THE NORWICH CONGRESS.

ON THE THERAPEUTICS OF CONSTIPATION.

By ARTHUR CLIFTON, M.D., M.R.C.S. Eng.

(Continued from p. 78.)

DISCUSSION ON DR. CLIFTON'S PAPER.

The President, in opening the discussion, referred in eulogistic terms to the practical value of the paper—an opinion which was endorsed by all subsequent speakers. He said that as with sleeplessness we must regard the general symptoms and constitution of the patient; remedies selected on this plan would

remove both constipation and sleeplessness.

Dr. Hughes said there was nothing that differentiated our practice from that of the old school so sharply as the treatment of constipation. Our patients do not get into a great state of mind they if do happen to miss once; and we can not merely relieve but actually cure constipation. When he was studying under Dr. Madden the latter said that patients who suffered from constipation, but to whom he had given medicines for something else, often came and asked him "if that medicine was an aperient." He always knew then that he had given the right medicine, and that it was sure to cure the patient. Dr. Hughes had noticed the converse also to be true—when patients complained that medicines given homoeopathically caused constipation, little good was to be expected from them. We must always seek to meet the totality of the symptoms, but often patients complain of nothing at all besides obstinate constipation. There were two simple things he had found of use:—(1) The use of whole-meal bread, and (2) the injunction to drink more. Many people drink far too little fluid in the course of the day, and that explains the value of the "glass of water before breakfast," the wonderful efficacy of which we frequently hear. Hydrastis had done more for him than almost anything. He gave it in drop doses of the \( \phi \) tincture in water before food. Sulphur was almost as good. If there were no special indication he gave Sulphur  $\phi$  for a week, and then Hydrastis as above. Collinsonia had done good service for him in pregnancy and piles.

Dr. J. Roche endorsed Dr. Hughes's remarks on Hydrastis,

but wished to know what led him to use it.

Dr. Hughes employed it empirically, but had no doubt the action was dynamic, as the quantity in which it acted was so small.

Dr. S. LILIENTHAL remembered a case in which a large quantity of fæces was scraped out of the rectum, although the patient had been passing a motion every day. He complained that it was "not satisfactory," and an examination showed the reason. Opium  $\phi$  was good for paralysis of the rectum and bladder. Alumina was only of use for infants. It was hard to distinguish

between Chelidonium and Carduus Maritima. It is only when Iron is given strong that it causes constipation. In congestive anæmia given high—never lower than 200—it acts well. Saccharum Lactis was a medicine exceedingly useful and much neglected. Sulphur given once or twice a week, and Sacch.-L. three times a day, go very well together. We often repeat medicines too frequently.

Dr. E. B. Roche mentioned a case which occurred when he was at King's College illustrating the last point. "Expectancy" was being tried, and all patients had coloured water given them. One patient who suffered much from constipation, and had been very largely drugged before attending, received one of these and got rapidly well. Some time after she wrote to ask for the name of the wonderful medicine that had cured her, and on looking it up it was discovered that it was merely coloured water.

Dr. Dyck Drown had found great benefit from Collinsonia 3x. In pregnancy there was no medicine like it, and in states of pelvic congestion. Veratrum Alb. 3 in states of great debility, with general want of expulsive power. Opium 2x he had found useful when the bowels were inactive, in consequence of a patient being kept in the recumbent position. Sulphur in a high dilution given as an intercurrent remedy was of great use. For instance, when Bellad. is being given three times a day, Sulph. 30 may be given once a day or once every other day.

Dr. LILIENTHAL said that Dr. Talcott had found Ferrum Muriat.

of great use in the constipation of melancholia.

Dr. DYCE BROWN said that Forrum Mur. 1x or φ, when indi-

cated by the general state, relieved constipation.

Dr. Deury said it was sometimes necessary to adopt measures in order to relieve a patient's mind. He mentioned a case in which a hot bath had produced a good action of the bowels. Constipated children were always healthy, and their parents

ought to feel quite happy about them.

Dr. CLARKE said that he could confirm Dr. Madden's experience about medicines relieving constipation when properly selected for some different complaint, and mentioned a case of very obstinate constipation which resisted all the usual remedies but yielded to Gelsemium 1, which was given (with excellent effect) for migraine. Spigelia had also been effective in constipation when it was given for affections of the heart. But he could not confirm Dr. Hughes's remarks about the converse being also true. When medicine had caused constipation in patients it had not, in his experience, always followed that the medicine was wrongly selected.

Mr. CLIFTON, of Leicester, said his experience had been different from his brother's. In the constipation of hemiplegia Opium 6 had succeeded after the  $\phi$  tincture had failed. Plumb.

acet. 1x he had seen do good in the constipation of paralysis, and after this Conium 1. In states of pelvic congestion, whether uterine or ovarian, Collinsonia φ was good. He had been utterly disappointed with the 3 and 6 dilutions. He thought the paper

too pathological.

Dr. DUDGEON did not at all agree with the latter opinion. He thought the paper exceedingly practical. He said constipation was acute or chronic. Acute constipation might be attended with violent symptoms. When he was attached to the Hahnemann Hospital he was asked to go and see a patient who was said to be dying, but who would like to see him before he died. He found him lying in bed, vomiting and almost pulseless. He learned that the parish doctor had been attending ten days or a fortnight, and had given all kinds of medicines without affecting the bowels. A rectal examination showed that there was a mass of fæces in the lower bowel. When this was removed the patient was completely relieved and said he felt "in heaven." Dr. Dudgeon urged that a rectal examination should be made in all doubtful cases. Once a patient came to him complaining of "constipation and all its attendant evils-piles, prolapsus, and great pain for long after motion." On cross-examination it came out that he had two stools a day, morning and night; that the second stool was only obtained after great effort and long straining, and that this resulted in prolapse. The patient thought it was necessary to have two motions a day or he would have obstruction. Dr. Dudgeon disabused his mind of this, told him to be content with one. motion a day, put him on some plan of diet, and he soon got well. Constantine Hering used to tell patients who complained of constipation, "You have got the most wholesome disease you can have." The speaker agreed with Dr. Hughes that patients often suffered from constipation because they did not drink enough. He recommended them to drink a glass of cold water night and morning, and if cold water did not agree, then hot instead. He thought much might be done by regulation of diet.

#### BRITISH HOMCOPATHIC SOCIETY.

At the meeting of the British Homeopathic Society on Thursday, February 4th, 1886, Dr. Roth, Vice-president, in the chair, Dr. EDWARD BLAKE read a paper entitled Clinical Notes on Disorders of the Urinary Tract.

Dr. Blake said he had greatly profited by the advice which an old practitioner gave him at the outset of his career, -never, however tired he might be, to neglect examining the throats of children, the kidneys of adults, and the bases of the lungs in older people. He referred to a number of conditions of the

urinary organs, and commenced by saying that Thuja had done no good whatever to the cases of papilloma of the urethra in which he had tried it; only operation had been of any use. Usually they were found in persons of the lithic acid diathesis, and the medical treatment should be ordered with regard to this. In cystocele or paravesical hernia the only remedy was repair of the ruptured perinseum. For the dysuria accompanying cystocele Staphysagria 1x is very useful; it also removes constipation when present. Referring to albumunuria, Dr. Blake showed there was no necessary connection between this when it occurred in pregnancy and puerperal convulsions. For hæmaturia when due to simple calculus from uric acid deposits in the pelvis or the kidneys, violent exercise was the best remedy. An interesting case was related in which the patient had (under different doctors) the rest treatment in the country and the exercise treatment in town; the latter proving to be much the more effectual. Dr. Blake concluded his paper by pointing out the connection between gout and diabetes. He related several cases in which the passage of sugar and the passage of large quantities of lithates alternated. In these cases he was always able to give a good prognosis.

Dr. Dudgeon, referring to diabetes, said that the presence of uric acid crystals in diabetic urine was not unknown. He had a case in which the two were frequently found. In another case there seemed to be an alternation between sugar and triplephosphates. After a time the patient went under an allopath, who put him entirely on milk. After undergoing this for months he again called in Dr. Dudgeon, who found the sugar was back and the triple-phospates were gone. His general health was good, and there was not much sugar. No medicine had been given. On the whole Dr. Dudgeon thought him improved. Regarding retention of urine, in a case he was called in consultation to see there was evidently ascites. The urine was normal. Dr. Murchison had pronounced it ascites. A surgeon was consulted, and he passed a catheter, and an enormous quantity of urine was drawn off. It was a distended bladder. The patient did not know there was anything wrong with his bladder, and passed daily the normal amount of urine. At last he got quite well.

Dr. Hughes thought Dr. Blake began with an inconsequence. Beginning with the maxim that we ought always to look to the kidneys in adults, he said in his paper nothing about kidney disease except the albuminuria of pregnancy. Nor did he agree with the other part of the maxim—viz., that we should always look to the throats of children. There is always some symptom to call our attention to the throat when it is affected. For urethral papilloma Thuga is useless, but Eucalyptus 1, both locally (1—10) and internally, had recently cured two cases. Dr. Hughes could not think that the cases Dr. Blake mentioned of

albuminuria of pregnancy did anything to remove our anxiety in cases of the kind. His patients had albuminuria before pregnancy, which makes a great difference. When the disease comes on during pregnancy the condition is much more grave. Dr. Ludlam gives Merc.- Cor. in albuminuria of pregnancy with great success. Dr. Hughes has a case of hematuria in a lady. She passes very large quantities, has no evidence of local disease, and has good general health. Hamamelis did no good. She is now on Phosphorus. Dr. Hughes has not seen striking results with medicines in the passage of urinary calculi. Berberis he has seen do good. Hot baths and chloroform do good in the actual passing when the calculus is comparatively large; the Borocitrate of Magnesia does certainly dissolve renal calculus, or at any rate remove all the symptoms. A drachm to eight ounces of water, a teaspoonful three times a day, is the dose. It does more than Coutrexéville and the other natural springs. Recently he has had experience with diabetic coma, and never having seen it before, questioned if it were not more common now. He has had four cases. 'In a young man of thirty there was great dyspnœa, and every now and then a little clouding of the mind before complete coma set it. In an old gentleman it began with hæmatemesis. In a lady between forty and fifty it began as coma. He found the age of the patients the chief point in the prognosis of diabetes. If patients are old it will not disappear, but will not kill them. If young there is good chance of cure, but if not cured it will kill quickly.

Dr. Clarke mentioned a case of retention in a patient who was the subject of locomotor ataxy. Cream of tartar and croton oil had been given without success. Bell. 3 and Canth. 3 gave speedy relief, and no further trouble occurred. He had also

seen uric acid present in saccharine urine.

Dr. Noble had found Apocynum of great use in dropsy of heart disease, but not in renal. Nor would he give gin or other diuretics in renal cases. He had had a case of albuminuria during pregnancy. The patient did not pass tube casts. If he had known of the distinction just drawn by Dr. Hughes he would have had less anxiety, for the albuminuria existed before the pregnancy. He had never seen Nitrate of Uranium do good in diabetes; Phosphoric Acid did most good for him, especially in the case of albuminuria and diabetes combined, in an old man.

Dr. JAGIELSKI asked if Dr. Blake had used electricity or massage in cystocele. In diabetes he had had striking results from the use of koumiss. The lithic acid of the koumiss did not increase the lithic acid diathesis. In very stout cases he would use the whey koumiss.

Dr. Briggs, of St. Paul's, Minnesota, said that in diabetes he had found Strychnine 2 trit. (or the pills, sugar-coated, of Parke Davis), alternated with Nitrate of Uranium, do most service. The Strychnine would control the nervousness and

desire to pass urine frequently at night.

Dr. BLACKLEY had recently had several striking cases of dia-He had tried Uranium Nitricum, but had never seen the slightest appreciable effect. The more he sees, the more doubtful he becomes whether he has ever done any good in the disease. In some cases the disease has been distinctly intermittent. In one case he gave Ac.-Phos. 1x, five drops three times a day, and the sugar diminished, and the patient got better. Afterwards he informed Dr. Blackley that he had had diabetes forty years, since he was fourteen. He got clear of the sugar for six months at a time. He got better that time, but when Dr. Blackley was away for his holiday the man had an attack of diabetic coma and died. This man was a farmer in Hertfordshire, who looked the picture of robust health, the reverse of spare. So he objected to Dr. Blake's dictum that a spare subject is the best. With regard to diet, Dr. Blackley is coming to the conclusion that the various forms of dieting are immaterial. One case of his went to a physician, a specialist in diabetes, who put him on special The sugar diminished, but returned when he returned to his former diet; there was no real amelioration. It is not usual to find any solids in diabetic urine; this may be due to the solvent power of sugar over usually insoluble substances. might be useful to treat uric calculi with glucose. He had had good results from Borocitrate of Magnesia, four grains thrice daily. Benzoic Acid is worth a more extended trial. A case which resisted all the usual remedies was much benefited by Benzoic Acid lx, five grains three times a day; it was in an old man, who was much improved. He thought albuminuria was the chief topic Dr. Blake mentioned. Dr. Blackley was surprised there was no reference made to casts. A patient once under him had had albuminuria and had been advised to have premature labour brought on. She had been under a distinguished physician, who showed her the albumen in the test tube. Blackley found under the microscope pus as well as albumen. She went to the full term, and lived some months after the child was born.

Dr. Roth (in the chair) said we are always producing sugar: the production is normal, but the excretion is not normal. This may account for the intermittency, the production being greater at some times than at others. An interesting case of albumenuria occurred in a patient of his who had suffered from an injury to the leg. One day he met him in Brighton, and saw his face swollen, and asked what was the matter. He found him suffering from albuminuria. He was under a homocopath. who gave Terebinth. He got no better, and subsequently came under Holthouse and George Johnson. He went from bad to

His abdomen was swelled, and he began to lose sight; he could not walk without crutches. Dr. Roth, who saw him as a friend, showed him an article in a medical journal on the skimmilk treatment of diabetes and albuminuria, and asked him to show it to his doctors. They pooh-poohed the idea, and gave Elaterium. He got worse, and at last the patient prevailed on Dr. Roth to treat him. Dr. Roth put him on skimmed milk and nothing else. This treatment was practised in Russia last century. No other food was permitted in that treatment, but it was usually advised to give some potash. Potash did no good, but when Dr. Roth gave citrate of potash the patient at once passed a good quantity of water. For thirteen weeks he took this milk, ten to thirteen tumblers a day. The tongue soon became slimy, and Dr. Roth advised a few grains of salt. He gave twenty-one grains of the citrate of potash in two or three doses in a wineglassful of water. In thirteen weeks the patient went to Brighton. With shampooing and exercise to improve the nutrition and appetite he rapidly gained strength and became quite well. That was in 1870, and he is now in excellent health.

Dr. Blake, in reply, said it was not the quantity of water that dissolved the uric acid, for in one case the patient passed most water when the uric acid was present. He still thought that the throat was most important to examine in children, as sometimes even in diphtheria the throat was not complained of. He omitted Merc.-Cor. through carelessness; in one of his cases it was the only remedy that did good. He thought that too much was not to be made of casts. Clear casts were found in normal health. Massage he had not tried in cystoma. He did not understand how it should be applied. He had not had much success with koumiss; his patients wouldn't take it. He thought it possible to have too great refinements in clinical investigation. He thought worry was important, and he believed it would actually bring on diabetes.

INTESTINAL NERVE-CHANGES IN PERNICIOUS ANEMIA AND GENERAL ATROPHY.—Sasaki (Virchow's Archiv, vol. 96, 1884) believes that the gastro-intestinal form of pernicious ansemia depends upon anatomical lesions of the nervous structure of the intestinal tract. In one case of this kind he found solerosis of the ganglion cells, with subsequent destruction of them, decrease in size of the nerve-fibres, and very many bright homogeneous bodies of hyaline character, in Auerbach's and Meissner's plexuses. In another case fatty degeneration had taken place, extending to the muscles. In localised affections of the intestines, as typhoid fever, catarrh, etc., a similar degeneration was found in many cases, but it was limited to the vicinity of the diseased portion of the intestine. Sasaki believes, therefore, that neurotic atrophy of the whole intestinal tract lies at the bottom of these conditions, and causes the general disturbances of nutrition.—(Centralbl. für klin. Med., Aug. 9, 1884.)—Pract., Feb., 1885.

## INSTITUTIONS.

#### A VISIT TO THE HOMOEOPATHIC HOSPITAL.

(From the Extra Supplement to "Every Girl's Magazine,"
February, 1886.)

I DON'T happen to be a homocopathist myself, but I think I neverhad a more pleasant hospital visit anywhere than the one I lately paid to the Homocopathic Hospital in Great Ormond Street, an institution which has just been added to the list of hospitals helped by our

Work Society.

The one large children's ward is for both surgical and medical cases, and contains twenty beds. Its walls are very prettily decorated by panels painted by members of the Kyrle Society, and by engravings and other pictures. Six weeks is the age of the youngest patient in the ward—quite young enough, it must be acknowledged. The small creature was feeding very comfortably from an old-fashioned glass baby's bottle when I saw it. Its neighbour on the other side of the fireplace was aged ten months, and evidently required pretty careful watching, for his movements were so active and sudden, that it would not have surprised me if he had attempted to take "a header" over the side of his pretty swing cot. Experience hardly makes babies wise, whatever it may do for older people. This young gentleman came into the Hospital with a smashed head, having had a violent fall upon it, owing to an unexpected spring he took over the shoulder of his ten-year-old nurse-sister.

Formerly baby patients were not received at this Hospital. The first was a poor little thing brought almost dying in its mother's arms one bitterly cold day, after having been refused admittance

from various reasons at four other hospitals.

In a delightful boat-swing in the middle of the ward sat a paralysed child of six. She had never walked at all, but now is just able to stand up for an instant—a wonderful step to have gained. There is a nice little go-cart, by-the-by, for the help of those who are very backward in the art of using their legs. A pretty "Little Em'ly" was stretched on a couch near the little lady of the boat-swing—literally stretched, and by something which to the unenlightened would look very like a rack, but the real name of which is a "Bryant splint," now often used in the treatment of hip disease. The relief given by this splint is so great, and the children get so completely accustomed to their position in it (painfully cribbed and confined as it seems), that if shricks are heard at all, it is when the children are considered well enough to be released from the flat and straight posture. I saw one little girl who had scarcely got over this trial. She cried bitterly at first, the nurse told me.

Among the boys I noticed a pale child of nine. And no wonder he was pale! He came from a model lodging-house, in which was a row of coppers for washing. Running along the top of them (with that talent for risking young life for which so many boys are distinguished) he fell into one which contained almost boiling water.

and was terribly scalded up to the knees.

"You'll never take such a jump again, will you, little man?" I said to him. He shook his head solemnly, but said nothing.



A new-looking little piano stood in one corner of the ward, the kind gift of a clergyman in the neighbourhood. Over it happened to hang an engraving of Millais' charming picture, "Sympathy." I thought, "Yes, the sympathy of dogs is wonderful; but it is fortunate for helpless sick children that they can have human sym-

pathy also."

Opening out of the ward was a little kitchen, where all was neat and convenient. And here, in drawers and cupboards, I was shown small frocks and petticoats most ingeniously made out of scraps and pieces given by drapers and others. It is pleasant to help those who help themselves. Almost all the children's clothes are made by the Hospital nurses, assisted sometimes by friends and by the women patients. Little garments are often much needed for giving away among the poorest of the out-patients, as well as for use in the Hospital. The Work Society present had been received with delight,

and was found most useful.

I was next shown a small ward occupied by six girls, most of them older than the children in the large ward. I have a theory that you can pet children to almost any extent without spoiling them. And here I saw a charming specimen of a much-petted yet unspoilt child. A very tired and white, but most sweet face I thought little Mattie's. She had been in the Hospital two years altogether, first coming in with severe hip disease. After some time she was sent out well enough to walk about on crutches; but one unhappy day she slipped, fell down some steps, and was dreadfully hurt. So now she is back again worse than ever, but made happy by a promise that she shall never leave her Hospital friends again. Her eighth birthday had just been celebrated, and she told me she had received eighteen presents. Doctors, nurses, lady visitors, etc., etc., all had remembered Mattie. I was shown a money-box containing the proud sum of 4s. 2ad.; also a big doll dressed in a fine robe, which had a history, for it was worked by Mattie's kind nurse when she was a child of thirteen, and had gained for her a prize. Then there was a birthday-book, in which I was asked to put my name; and a white dressing-gown (Mattie begged it might be white, and certainly it matched the colour of her poor face), made by the nurses, that the little birthday queen might be suitably arrayed. Hearing all this, some healthy children might be disposed to think Mattie a highly fortunate creature. Ah! but how about always feeling weak and tired? how about the seven abscesses hidden beneath the pretty coverlets and dressing-gowns? and how about the attacks of severe pain caused by them? A very patient, gentle, loving little creature is Mattie. I should like to go and see her again some day.

The children of this Hospital are indulged with plenty of pets, and very good and humanising I believe it is for them to be taught in this way to love and be kind to animals. One little girl brought Johnny<sup>1</sup> the tortoise to be admired. I was told he was very intelligent, and moved his head when called by his name, but it was my private belief that he had gone off into his winter sleep, and was deaf to all voices, however affectionate. Another child came to me with a tame dove carefully held against her little breast. Uncon-

<sup>&</sup>lt;sup>1</sup> This excellent animal requests us to state, with all deference to Miss Summer, that his name is *Tommy* and not *Johnny*. All good tortoises are called "Tommy."—ED. H. W.

sciously she made one of the prettiest pictures I ever saw, as she looked down upon the bird's head. A harmless, innocent, beautiful pair they looked. Then I was called upon to notice a large cage containing about twenty-four foreign birds-wax-bills, finches, etc. It is a great interest to the children to supply them with scraps of wool and straw for the lining of their nests, and one little girl named Fanny is the special caretaker of the cage and its inmates. A fine cat lay at the foot of a bed in the women's ward; but the greatest pet of all was an intelligent-looking terrier known as "Nurse Judy" (if I remember the name aright), to whom I was formally introduced. She has attached herself to the children's ward and its patients in that faithful, affectionate, strangely understanding way of which not a few dogs are capable, and of course she gets plenty of notice and love in return for her good services.

I have filled up my space with an account of one Hospital visit this M. S. SUMMER.

time.

# SUSSEX COUNTY HOMOEOPATHIC DISPENSARY. (HILBERS MEMORIAL.)

THE Second Annual Report of this Institution has been received by us, and we are glad to note an increase in its usefulness and prosperity. The number of cases treated last year was 11,227 as against 7,201 of the year before; and the number of visits paid at home was 6,589, against 4,187 of the previous This excellent Dispensary is well worthy of support. Subscriptions may be sent to the hon. sec., Dr. Belcher.

### OXFORD HOMEOPATHIC MEDICAL DISPENSARY.

Dr. Arthur Guiness has sent us the Thirteenth Annual Report of this Dispensary, to which he is physician. The committee report favourably of the work done during the past year, 1,102 new patients having been admitted. As a proof of its usefulness we may note that it is among the charities which receive grants from the Hospital Sunday Fund.

### NEW PREPARATION.

#### HONELINE SKIN SOAP.

We have now used this soap for some time, and have no hesitation in pronouncing it a very excellent preparation. It is uncoloured and unscented; and being free from excess of alkali, it does not leave the skin with the unpleasant harsh feeling which often follows the use of some popular soaps. It should be excellent for fine and delicate skins. It is manufactured by M. Mariette, Kensington, London.

# REVIEWS OF BOOKS.

#### THE REIGN OF LAW IN MEDICINE.1

Dr. Dyce Brown was chosen to deliver the Annual Hahnemannian Oration for 1885, and he took for his subject The Reign of Law in Medicine. The oration was delivered on the 5th of October, and it has now been published by the author in the form of a brochure. Dr. Dyce Brown has been well advised in taking this step. His address is full of interesting matter, and bristles with facts which are not generally known to the public at large, though some of them are familiar enough to medical homoeopathists. Dr. Dyce Brown shows the vulgar, scurrilous, and mendacious attacks that have been made on homosopathy and its founder. He refers to the unsatisfactory condition of allopathic medicine as stated by the allopathists themselves. He also shows that the only direction in which advance can be made is in the direction of the development of Hahnemann's law, proving this by the popularity of those books whose authors have helped themselves most liberally from the homeopathic manuals. Dr. Dyce Brown concludes as follows:—

"Gentlemen, I have done. I think I have said enough to show, in however feeble a manner, what a lofty genius Hahnemann's was, and how far above his fellows his mind ranged, the rude and rough medicine of his day only bringing forward more vividly by contrast his great mind. The day will come, as surely as I stand here, when the law of similars will be the dominant rule of practice in the profession, and it will then be reckoned a privilege to do anything which will help to compensate for the tardy recognition of the genius of Samuel Hahnemann, who was the first to inaugurate the reign of law in medicine."

The publication of this little work comes most opportunely, and we trust it may have a very large circulation. It should be of great assistance in the new educational crusade.

#### A TREATISE ON THE BREAST.3

This comprehensive essay on the physiology and pathology of the breast has reached a second and enlarged edition. As in the treatise on Epithelioma of the Mouth, by the same author, attention is especially devoted to demonstrating the course by

A Treatise on the Breast. By H. J. Ostrom, M.D.

<sup>&</sup>lt;sup>1</sup> The Reign of Law in Medicine. Being the Hahnemannian Oration for the year 1885. By Dr. Dyce Brown, M.A., M.D., Lecturer on Practice of Medicine at the London School of Homosopathy. London: Trübner and Co. 1886.

which normal and healthy processes pass into morbid, and to showing how diseased arise from the same elements as do healthy products, while neoplasms follow in the main the same physiclogical laws which are present in the normal physiological tissuegrowth and repair. These views are now generally accepted in pathological literature, and Dr. Ostrom does good service by pointing out how they may be made use of in practice. We notice in this book, as in the author's work previously reviewed by us and in some other American books, that the grammar and orthography differ from that familiar to us. Possibly in the hurry which is supposed to be universal in the States, there is only time to pay attention to matter, and manner must be disregarded. Many paragraphs admit of no form of parsing known in this country, the punctuation only increases the riddle, while the spelling gives one chills which suggest Hahnemann's experience with Cinchona. However, the matter is excellent, and we consider this the best work on the breast and its diseases with which we are acquainted.

The classification of some of the diseases is strange, but good

etiological reasons are offered for the changes.

Parts I., II., and III. deal with the anatomy and physiology of glands in general and the mammary gland in particular. Part IV. is devoted to the etiology of the organ, and its diseases follow in chapters arranged according to the tissue affected. Operations on the breast are discussed, then the special therapeutics, and a short but valuable Repertory concludes the treatise. The writer well describes the etiological relation of mammary disease to the evolution and involution of the gland and to irritation sympathetic to disorder of the reproductive organs—a spurious evolution, as the author names it.

#### SOME FEVER EXPERIENCE.1

This pamphlet consists of a paper read before the Homosopathic Medical Society of Pennsylvania. It discusses a number of cases of enteric fever, in about one half of which intermittent pyrexia was a marked feature. The use of quinine in such cases is considered, and the conclusion arrived at that this drug is of no value therein.

Wood in his *Practice of Medicine*, Trousseau, and others, have drawn attention to the resemblance of many cases of typhoid to miasmatic fevers, and there can be no doubt that many cases of the former are treated as malarial disease. The late Professor Murchison insisted on the great difficulty of diagnosing enteric fever in many cases of intermitting pyrexia;

<sup>&</sup>lt;sup>1</sup> Some Fever Experience. By Charles Mohr, M.D., Philadelphia.



in such cases he advised the suspicion of enteric fever, where the fever was of a remittent type, where there was no decided history of exposure to malaria, and where Quinine and Arsenic failed to benefit. Of course valuable time and appropriate treatment may be sacrificed while using these test drugs, and we shall do well to nurse each suspicious case as if it were enteric

fever, while using the particular drugs indicated.

That typhoid fever may be imitated by other diseases besides ague (especially by pneumonia, pyæmia, tuberculosis, some cases of relapsing fever, pent-up purulent collections, infantile remittents, and intermittents from hepatic or urinary disease), is well recognised; but scientific medicine offers remedies for the different varieties of an obscure disease, without requiring typical cases on which to exercise a routine or so-called specific treatment.

#### SCHUSSLER'S TISSUE REMEDIES.1

THE fact that this little work has run through twelve editions in nine years speaks well for its popularity. And we have no hesitation in saying that the popularity is well deserved. Taking as his basis the facts of the chemistry of the living tissues of the body, Dr. Schüssler finds that each of the twelve remedies he uses has some special function to perform in relation to one or more of the tissues. And he infers that when in the tissues the balance of proportion between the constituent elements is deranged, that salt which is characteristic of the tissue at fault will, if given in minute division, restore the balance. Dr. Schüssler's theory may or may not be true; but it is a remarkable fact in connection with these remedies that those of them which have been well proved on the homosopathic principle—e.g., natrum muriaticum, silica, natrum sulphuricum, and (if we may count our hepar sulphuris as practically the same) calcarea sulphurica—have given indications by the symptoms they have produced of the diseased conditions they are capable of curing; and these are practically the same as those for which Dr. Schüssler recommends them, deducing his reasons from a different source. We have little doubt that the other medicines he uses, as well as possessing the chemical relation to the diseases for which he gives them, will be found, when they are proved on the healthy, to be capable of producing similar states. In short, we believe that Dr. Schüssler's biochemical treatment is in reality homoeopathy.

<sup>&</sup>lt;sup>1</sup> An Abbreviated Therapy: The Biochemical Treatment of Disease. By Dr. Schüssler, of Oldenburg. Twelfth edition, partly rewritten, with Appendix containing Clinical Histories. Translated, with the addition of a Repertory, by J. T. O'Connor, M.D. Philadelphia: F. E. Boericke. London: Homeopathic Publishing Company.



Of the efficacy of some of his medicines we can personally testify. Others we have not used, and of them we cannot speak from experience; but the cases, very well reported, that appear in the appendix are certainly very striking. One great advantage in connection with these remedies is that the dosage recommended is fairly uniform. The 6th decimal trituration appears to have given abundant satisfaction, though Dr. Schüssler sometimes uses the 3x or 4x. Moreover the application is simple and the indications are clear. This is a work every homosopathist should possess, and we recommend every one desirous of advancing his art to give the remedies as yet unproved a thorough proving.

#### THE THOROUGH PHYSICIAN.1

We tender our thanks to Dr. Ludlam for forwarding to us a copy of his admirable lecture. Too often addresses of this kind are full of stale platitudes and (to use a mild term) twaddle, when they are not something worse. Dr. Ludlam's address is a very refreshing exception to the general rule. Taking his text from Hahnemann—

"When we have to do with an art whose end is the saving of human life, any neglect to make ourselves thorough masters of it becomes a crime"—

he went straight to practical matters, and showed his hearers what would be required of them if they were to become "thorough physicians," illustrating his remarks in such a way that the students could not fail to be impressed. As he took his text from Hahnemann, so he closed with a quotation from the same fountain of wisdom; and as the quotation is one which we and our opponents have much need to remember, we cannot do better than reproduce it. It is to be found p. 363 of the Lesser Writings, Dr. Dudgeon's translation (American edition).

"The rallying motto of a sectarian name is incapable of exciting to sober, calm, scientific investigation; it only rouses the explosive spirit of accusations of heresy to a fierce volcanic flame. Truth and the weal of humanity should be the only motto of the genuine elucidators of the art, and the watchword of their brotherly, peaceful bond of union, without slavish adherence to any sectarian leader, if we would not see the little good that we know completely sacrificed to party spirit and discord."

<sup>&</sup>lt;sup>1</sup> The Thorough Physician. An Introductory Lecture. By Dr. R. Ludlam, Chicago.



# GENERAL CORRESPONDENCE.

#### MEDICAL REFORM.

To the Editor of the Homeopathic World.

SIR,—I must thank you for your editorials and the publication of the excellent paper by Dr. Clifton advocating an earnest appeal to the intelligence and sense of fair dealing among the

people in behalf of medical reform and improvement.

I desire especially to urge the issue of Dr. Dudgeon's correspondence with Macmillan and Co. and Dr. Brunton, in pamphlet form, for general circulation. I can imagine no documents better calculated to show up the senile weakness and sense of danger afflicting the old school, and none more loudly calling upon an enlightened public to see that the safety of science and welfare of the sick are not sacrificed to the conceit and selfishness of a few medical editors and publishers.

I thought Dr. Brunton a man of too much culture and one imbued with too much real love of science ever to assume such

a rôle as I see him in, through his letter to Dr. Dudgeon.

Is it possible that you have in England such a medical trades-union, such a state of terrorism among the leading physicians of the old school, that Macmillan and Co. should actually be afraid to publish an advertisement of a homoeopathic book? If you have, then it is high time that the people of England should be made aware of the fact.

Let those in authority, those who regulate your institutions of learning, who make your laws and enforce your customs, understand the spirit and purposes of the orthodox medical faculty, and I am persuaded it will not be long before your hospitals and your schools for the teaching homeopathy and extension of its benefits, will be legally recognised and em-

powered throughout the empire.

Knowing as I do the learning and ardent devotion to truth that actuate the practitioners of homosopathy in your country, I should be greatly disappointed were they left by the laity and the ruling powers to battle alone and for years against such blind prejudice and bitter persecution as shown in the correspondence published in the last issue of the World. And it seems to me not only proper, but necessary, that you should make widely known the fact that the old school, afraid of your books, afraid of the enlightenment you may bring to the profession, has come to the last measure of a desperate tyranny, that of forcibly shutting out the light from medical readers.

Well may those who have never mentioned Hahnemann but to traduce him, and homosopathy but to misrepresent its history

and its aims, fear Ameke's history!



It is a masterly defence of Hahnemann and his teachings, and a fearful arraignment of those who belied and persecuted him.

In closing allow me to plead my relationship to your people through a generation not far back, and my warm attachment to my medical brethren and to their works in England, for presuming to write, as I have done, upon affairs outside of my own country.

With much esteem,

Very truly yours,

Nashville, Jan. 20.

J. P. DAKE.

### To the Editor of the Homeopathic World.

SIR,—As a lay homoeopath I am pleased to see that the homoeopathic medical men, or at least a number of them, have at last realised the hopelessness of expecting that the allopathic profession will ever absorb them and adopt the rule of similars. Of course the relinquishing of this policy and the adoption of a new one as a dernier ressort renders necessary the organisation of lay homoeopaths to create a force in the shape of public opinion. The question is, How best can this be done? and

upon this head I have a few remarks to offer.

It appears to me the great object to which all efforts should be directed is to obtain a charter to create a licensing body having power to examine students and issue licences to practise. To obtain such a charter it would be necessary to engage in a Parliamentary fight, and some energetic M.P. would be required to take the matter up. To enable him to do this with success, Parliament would require to know the extent of the homeopathic constituency the M.P. has at his back. brings me to a point I have advocated before, which is the registration throughout the United Kingdom of persons who believe in the homeopathic system, and desire to be treated by Perhaps the readiest way to do this and make it pay would be to get out a homeopathic directory of the names and addresses of professed adherents of the system. If small printed slips, as used in compiling a directory, were issued to homeopathic doctors and others in each town, and also interleaved in the World, the compilation might be easily and cheaply got out. Most homoeopaths, no doubt, would buy a copy of the book and fill in a written order for same if printed on back of slip. soon as the adherents of homeeopathy could be brought to a focus and constituted into an accessible body in this manner, it would be then seen what force of numbers in each town could be brought to bear on Parliament by the aid of petitions and otherwise. In fact the lay body would be organised, and could then be worked up by circulars and by travelling lecturers.

lay homoeopaths saw a practicable scheme put forth and an energetic central body to work it out, there would be some chance of getting the necessary capital to carry on the fight and

endow the licensing body.

Medical men are rarely good directors of public movements; their minds have necessarily been warped into a scientific groove, and hence too much cannot be expected from them: besides they have their practices to engross their attention. An organiser and good tactician who should be a good speaker is badly wanted to head a movement of this kind. The views of Dr. Dake in the December number of the Homocopathic Review seem to me in point. The editor of the Review, however, thinks a licensing body out of the question. It is no reason that because there are too many allopathic licensing bodies that a new system of medicine like ours should not have fair play. If we make ourselves sufficiently strong and persistent we may get from Parliament anything in reason. Where a country like England is governed on the class interest system nothing is got from the Legislature without fighting. The believers in homeopathy must be welded into a class for offensive and defensive purposes, or continue to whine at the feet of allopathic bigotry and insolence.

> Yours, etc., E. R. IVATTS.

### To the Editor of the Homeopathic World.

Sir,-I greatly regret that I was prevented at the last moment from attending the preliminary meeting of the "Medical Reform League," especially as I understand that the general opinion of those present ran in favour of the name "Homoeopathic League," in preference to the broader and non-sectarian title. I am very willing to admit the value of a Homosopathic League or Association, in which the great lay army could combine with the small professional phalanx to make the claims of Hahnemann's method, and the injustice done to those who appreciate this method, better known. So strongly did I hold this view, that a meeting of West of England practitioners was called at my request, some two years ago, at which it was unanimously agreed to form such an Association. But on going into the details, and examining the methods of action, I came gradually to the conclusion that as a matter of policy it would be better for such an Association to start upon a non-sectarian basis. I take it that the homosopathic practitioners of the present day are not merely specialists in a certain branch of therapeutics, but represent to the public a complete knowledge of the treatment of disease in contradistinction to the very incomplete knowledge of the old school.



I take it that the public grievance is the incomplete knowledge of known methods for the cure of disease possessed by the great majority of practitioners. Not only is the study of "treatment" neglected in the schools, but there exists an open

conspiracy to prevent the diffusion of knowledge.

It is not the deficiency of homeopathic knowledge alone which makes the "incomplete practitioner." I hold that a medical man who cannot "pack" an infant for convulsions, or give a lamp bath in an emergency, and knows nothing of the principles of thermo-therapeutics, is an "incomplete practitioner," whose deficiencies may make the difference of life or death to his patient. I should consider that one who had practised pure homocopathy for many years, and who had not kept himself abreast with the therapeutics of the schools and the various "extra" methods of treating disease, would be an incomplete practitioner. Of course, it is evident that the practitioner who knows only the treatment of the schools is necessarily a one-handed man, and I believe a large part of the confidence which the public feel in homocopathic practitioners is due to the fact that it is known that they must pursue both methods of study. But in urging a Reform of Medical Education and the conditions of practice, we have no right to assume that homocopathy alone is wanted to render the practitioner complete in his knowledge of the cure of disease. The neglect of homeopathy and the conspiracy against homeopathy must form a prominent object in the early propaganda of the League, but the sympathy of the public will be much narrowed if it is made to appear that the interests of a sect are only sought to be promoted by it.

To ask the public to decide in favour of our own particular views would be to stultify "the profession," the honour of which it is our duty to guard as jealously as those who have falsely taken the title to themselves to make base use of it. Let us cleanse the "Augean stables," not set fire to them.

Bath.

Yours respectfully, PERCY WILDE, M.D.

### DR. SCHUSSLER'S TISSUE REMEDIES.

To the Editor of the Homeopathic World.

Sir,—Permit me to draw attention to the article cited from the Allgem. Homep. Zeitung, page 34 in last month's number of your journal. May I be allowed to say the medical gentleman who cured his case by a "fluke" had applied very many remedies without success? He had also recourse to Dr. Schüssler's tissue salts, with no better results. In this instance his

failure arose from selecting the wrong remedies. If in his diagnosis he had taken the pathological conditions into proper consideration, he could never have chosen Kali Sulph. nor Kali Phos. He gave Forr. Phos. for the inflammatory condition causing redness of the parts. But for the swelling Kali Chlor. (Potassium Chloride) should have been chosen, as well as for the discharge. This is indeed the chief remedy in gonorrhosa, in fact a specific wherever swelling exists, whether from subcutaneous or interstitial exudation. The spasmodic cough resembling whooping cough, too, called for the same two remedies, Forr. Phos., and Kali Chlor. to follow, which never fail to give relief.

I refer the readers to Dr. Schüssler's "Abridged Therapeutics," translated from the German, A. Siegle, 30, Lime Street, E.C.

AN OLD SUBSCRIBER.

[The article referred to appeared in our January number. This letter came too late for insertion last month.—Ed. H. W.]

#### CACTUS GRANDIFLORUS.

To the Editor of the Homeopathic World.

SIR,—The following facts relating to Cactus Grandiflorus may not be without interest to the medical profession, and not the less so, perhaps, from being the narrative of the experience of

a non-professional.

Some years ago, when Castus had been recently introduced, I was in Mr. Clifton's shop at Derby, talking with him on various matters, and in the course of conversation he remarked, "I have just had a new remedy which I should like you to try the effects of," and he gave me some pilules of the third dilution of Castus. I put a few of them in my mouth at once, and let them dissolve, and in a few seconds I felt a tension in the brain, such as I imagined might arise from incipient congestion. He had told me nothing of the properties of the medicine, so that I was not anticipating any special effects either in one part of my physical frame or in another, so that imagination could have had nothing to do with the effects I experienced.

And now for the application of this experience as a striking instance of the truth of the homeopathic law. In the summer, a year or two after the above experience (I forget how long, I am a bad hand at dates), on a remarkably hot day of the summer in question, information was brought me that two men had been brought from the hay-field struck down by the excessive heat. I at once thought of my experience of *Cactus*, put a bottle of the tincture in my pocket, and went to see them. One, an old man, I found lying on the settle in his cottage,

writhing and groaning with pain, evidently in a very bad way, a case that would have been pronounced by any allopath to be a very serious one. I put a few drops of the Cactus tincture into a teacupful of water, and told them to give him two or three teaspoonfuls at frequent intervals. The other sufferer I found in like condition, and was informed that he had also been sick. I left the same medicine and instructions for him He was a young man from a neighbouring parish about three miles distant, but was staying during the haymaking at his mother's, who resided in this parish. About three hours after I went to see my patients again, how they were getting on, feeling sure that I should find them better; but conceive my gratification at receiving the information that the old man was quite set up again, and had gone back to the hay-field, and that the young man had left his bed and had started off to his own home, three miles distant. I may add that the mother of the young man seemed deeply affected at the successful result. and exclaimed, with tears in her eyes, "Oh, sir, it was wonderful!"

Now here was a direct application of the homoeopathic law of healing, from personal experience alone, and from simple reliance on its truth.

I had no further cases of the kind to try the Cactus upon till one day last summer, when I was informed that one of my parishioners had been brought from the hay-field disabled by sunstroke. I sent him a few drops of the tincture, and the next day was informed that he was all right again and at his work.

Surely the above facts point to Cactus as a valuable remedy in cases of sunstroke and similar affections; and with this conviction I, on two occasions, when our soldiers were suffering from sunstroke at Ashantee and in the late Egyptian expedition, wrote to the War Office describing its effects, and recommending its use, but of course the only result of my communication was a red-tape acknowledgment. I have no doubt, however, it would be of the utmost value in such cases, especially with our armies when engaged in hot climates. Its compactness, too, is a great recommendation. An ounce bottle of the tincture in the pocket of an officer would suffice for a whole company on the march, and two or three drops promptly administered in a little water to any soldier struck down with the heat would probably suffice to set him up again in a few minutes.

The members of the homocopathic branch of the medical profession are no doubt well acquainted with the valuable properties of this remedy. I will mention one or two other cases in which I have found it of use. I used to be troubled with sudden attacks of a short dry cough, which seemed to me to be of a slightly inflammatory or congestive character. Two or three drops of Cactus promptly taken in these attacks generally sufficed to free me from them. In a few minutes after taking it a lump of tough phlegm was discharged from the lungs, and the cough was gone.

A few years ago a neighbour, under allopathic treatment, was suffering from congestion of the lungs, accompanied with excruciating pains in the head. I gave Castus in this case, and it was followed by very marked and rapid improvement in both head and lungs; whereas, under the allopathic treatment, the patient was progressing very slowly, if at all.

Carrington Rectory, Derby. F. H. Brett.

THE ELIMINATION OF MERCURY.—Dr. Schuster has shown that mercury can be detected in the fæces and in the urine long after its administration has been discontinued. He fixes the limit of this period at about six months. Applying the knowledge of this fact to the elucidation of some clinical facts he remarks that "it is surely not accidental that frequently, in from four to six months after mercurial treatment, the banished syphilitic symptoms reappear or show themselves more decidedly, both in the early and in the late manifestations of syphilis. After the elimination of mercury has continued for four months, there is too little mercury left in the system to retard the renewed increase of the syphilis in such relapsing cases. It is advisable, therefore, in view of the eliminative period of the incorporated mercury, to repeat the mercurial treatment of syphilis in from four to eight months after the course which has suppressed the syphilitic manifestations, according to the earlier or later expectation of fresh symptoms."—(Journal of Cutaneous and Venereal Diseases, vol. ii., No. 9.)—Pract., March, 1885.

#### MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Fenwick (8.) and Bedford. Student's Guide to Medical Diagnosis. 6th edit., revised and enlarged. (Churchill. 7s.) Flint (A.). Manual of Auscultation and Percussion; of the Physical Diagnosis of Diseases of the Lungs and Heart, and of Thoracic Angurism. 4th edition. (Philadelphia. 9s.)

Qarrod (A.). An Introduction to the Use of the Laryngoscope. (Longmans. 8s. 6d.) Hamilton (F. H.). A Practical Treatise on Fractures and Dislocations, 7th American edition. (Philadelphia. 28s.)

Hare (H. A.). The Physiological and Pathological Effects of the Use of To-Pathological Effects of the Use of To-bacco. (Philadelphia. 2s. 6d.) Hartridge (G.). The Refraction of the Eye: A Manual for Students. 2nd edition. (Churchill. 5s. 6d.) James (P.). Sore Throat: its Nature, Varieties, and Treatment. 5th edition. (Churchill. 6a. 6d.) Lewis's Pocket Medical Vocabulary. (Lewis. 3s. 6d.)

Loring (E. G.). A Text-Book of Ophthalmoscopy. Part I: the Normal Eye, Determination of Refraction, and Diseases of the Media. (New York.

Luckes (Eva C. E.). Hospital Sisters and their Duties. (Churchill. 2s. 6d.) Meynert (T.). Psychiatry: a Clinical Treatise on Diseases of the Fore-brain. Translated by B. Sachs, M.D. (New York. 12s. 6d.)

Pepper (W.) and Starr (L.). A System of Practical Medicine. Vol. 2: General Diseases (continued) and Diseases of the Digestive Systems. Vol. 3: Diseases of the Respiratory, Circulatory, and Hæma-topoletic Systems. (Philadelphia. 25s.

Roberts (W.). Lectures on Dietetics and Dyspepsia. New edition. (Smith and Elder. 3s.)

usself (W.). Investigations into some Morbid Cordial Conditions, including the Cartwright Prize Essay on "The Russell (W.). Heart in Debility." (Simpkin. 5s.)

Sims (J. M.). Clinical Notes on Uterine Surgery, with Special Reference to the Management of the Sterile Condition. Memorial edition. (New York. 5s.) Tyson (J.). A Guide to the Practical Examination of the Urine; for the Use of Physicians and Students. 5th edition. (Philadelphia. 7s. 6d.) Williams (R.). The Influence of Sex in Disease. (Churchill. Ss. 6d.)

#### SHORT NOTES, ANSWERS TO CORRESPONDENTS, RIC.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester Road, South Kensington, S.W.

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane. Paternoster Row, London, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

CORRESPONDENTS.

received Communications from Dr. J. W. Hayward, Liverpool; Dr. J. D. Hayward, Liverpool; Dr. Pullar, Edinburgh; Dr. M. Reed, London; Dr. Winterburn, New York; Dake, Nashville; Foster, Dr. Scarborough: Northampton; Knox Shaw, St. Leonards; Dr. August Zöppritz, Stuttgart; Salzer, Calcutta; Ivatts, Dublin; Dr. Dudgeon, London; Dr. Guiness, Oxford.

BOOKS AND JOURNALS RECEIVED. Allgemeine Homöopathische

Zeitung.—Zoophilist. — Medical Advance.—Monthly Homœopathic Review. — Revue Homocopathique Belge.—Homöopatische Monatsblätter.— New York Medical Times.— Homoopathist.— American St. Louis Periscope.—United States Medical Investigator .-Medical Advocate.—Clinique. Medical Visitor.—Chemist and Druggist.—The Homoopathic Journal of Obstetrics.—La Reforma Medica.—The Guide. —Revista Hom. Catalana.— Hahnemannian Monthly.— Bibliothèque Homœopathique.-Medical Era.-Boericke  $\mathbf{and}$ Tafel's Bulletin.—Medical Annals. — California Homeopath. — The Clinical Review.—Homoeopathic Physician.—North American Journal of Homoeopathy.-Liverpool Daily Post.—Chemist and Druggist of Australia.-Ho-Recorder. — Hymœopathic gienic Medicine. By T. R. Allinson, L.R.C.P. — Superiority of Homosopathic Treatment.—Dogs in Health and in Disease. By J. S. Hurndall.— The Reign of Law in Medi-By Dr. Dyce Brown.— Progress of Dentistry and Oral By Dr. J. J. Wedg-Surgery. wood. - Third Annual Announcement of the Hahnemann Medical College, San Francisco, 1886.

# School of Medici.

THE

# HOMŒOPATHIC WORLD.

APRIL 1, 1886.

#### THE PROSPECTS OF THE LEAGUE.

THE chorus of approval that has followed the issue of the Prospectus of the Homcopathic League is most encouraging to its promoters. In another part of our present issue the text of the Prospectus will be found, with the accompanying circular. They have been sent in the first instance to the medical men and chemists whose names are in the Homcopathic Directory. A large number of replies have been received, with subscriptions, and requests for more copies of the Prospectus for distribution; and almost every post brings in the names of new subscribers.

The voices that have been raised against the movement are very few indeed, and their objections have been based on an entire misconception of the aims of the LEAGUE and the merits of the case. We must always pay the greatest respect to those who have fought for Truth in days gone by, and with whom life has grown of late so much more easy that they think the battle won; but when we find them basing objections against our action on their own prejudices,—when we see them putting questions of professional etiquette before questions of public good, we are bound, however respectfully, to disregard their advice. is true that we do live on terms of warm friendship and social equality with many individual members of the allopathic school; but it is not their action as individuals that we complain of, it is their action as a body. This is wrong: it is founded on untruth, it is kept up by injustice, and the

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strength of it lies in an uneducated public opinion. If the allopathic intolerance and injustice had not behind it the weight of a public opinion that either does not know or does not care, it would not endure a day. It is the aim of the League to enlighten public opinion; and as the guardians of the public health, it is the duty of medical homoeopathists to press forward this work. We must not be turned from the path of duty by a mistaken notion of what is professional or polite. If we do, we shall find ourselves in the position of the undergraduate who could not think of pulling his drowning fellow-student out of the water because they were not members of the same college.

It will be observed that the movement is still spoken of as a "Proposed" LEAGUE, and the Committee as a "Provisional" Committee. The amount of support already received gives absolute assurance that a strong and vigorous association will be formed, but in the meantime there is no occasion "Make haste slowly" is a very useful adage, and for haste. there is much silent work to be done before we take our stand definitely before the people. In the first place we want every reader who has not done so to send in his or her name and subscription. We want those of our friends whose names carry weight with the public, and who know by experience the benefits of homeopathy, to give us the sanction of their names by joining our Committee, or by allowing themselves to be nominated vice-presidents. The provisional Committee have no desire to become a permanent Committee. their wish to hand over their duties as soon as possible to a Committee of Laymen and Laywomen. This is a popular movement, and it should be carried on by the people and their representatives. The doctors wish for nothing better than to keep themselves in the background and do the work as far as may be unseen.

Another reason for making haste slowly at present is that our most active lay workers have their hands full. There is the Bayes Ward to open and the Prize Essay to decide upon and circulate. When the work connected with these is over the claims of the League will have full force. In the mean-

time let every one work to obtain members and make the movement known, so that when we do come before the world, and transform ourselves from the provisional to the permanent condition, the world may find that it has before it an Association of power that it cannot afford to despise.

# PROGRESS AT THE HOSPITAL.

Major Vaughan Morgan has addressed to the medical men practising homeopathy in the United Kingdom, a letter which we publish on another page. The mention of the gallant Major's name is a sufficient indication that the letter has reference to the London Homocopathic Hospital, the interests of which institution he promotes and guards with such constant care. His conspicuous services to homoopathy as represented by the Hospital, and his personal generosity in the cause, entitle any manifesto from his pen to that sympathetic individual attention which we do not doubt the profession will bestow on the letter in question. Its raison d'être is expressed in its concluding paragraph, which states that the Hospital "ought to be the pivot of homocopathy in England, and a centre of union among all the disciples of Hahnemann." It further declares that the Board of Management "have always regarded its mission in that light, and that if it should appear to lack any of the requisite qualities. they will be happy to receive and consider any suggestion having that purpose in view."

The immediate reason of this strong appeal for a yet closer union of the medical men with our central Hospital is the growing necessity for increased accommodation in the Hospital itself for patients. A more gratifying ground of appeal it would be impossible to conceive. During the year ended March, 1885, the Hospital admitted by far the largest number of patients of any year of its history. During the year ended March, 1886, an equal, if not even greater number will have been received. The accommodation for male patients has latterly, from many wise considerations, been restricted to one ward; and during the last six months num-

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bers of men have been refused admission for want of room. Concurrently with this urgent necessity for increased bedsthere has been for a good many months past a new ward, contiguous to the men's ward, lying unoccupied for want of funds. It is with a view to opening this new ward during the year 1887 that Major Vaughan Morgan makes the present appeal to the profession to influence their friends to support the Hospital.

The plan suggested reflects great credit on the financial policy of the Hospital. By dint of great energy and unceasing watchfulness, combined with extreme care not to trespass too often and too far on the extraordinary liberality of the adherents of homeopathy, the income of the Hospital during the past ten years has been increased beyond the limits worked for and the hopes entertained. As a consequence the operations of the Hospital have developed in a proportionate degree. Its capacity has been increased to 94 beds-80 in the old building, 14 in the new ward. Its daily average has risen from 45 and less, to 67 within the last half-year. And by the ingenuity with which new sources of income have been discovered and old ones developed, it meets its largely increased expenditure with a largely increased income. Nothing is more gratifying in the history of this institution, or more significant of the truth of homeopathy, than the handsome liberality with which the followers of Hahnemann support their representative Hospital. Now that the necessity for extending the work of the Hospital is forced on the management the question arises, shall the institution be plunged boldly into increased annual expenditure, necessitating debt. and those constant heartrending appeals which the benevolent so often find it impossible to respond to and distressing to refuse? or shall the development proceed on the principles which are recognised as sound in general affairs of life? "Charities thrive best with a heavy debt," is a speech often thoughtlessly made. It sounds smart. Its antithesis to the facts of everyday life gives it an air of pleasing novelty. But it works horribly. Charing Cross Hospital last year spent £12,775 in its noble work on the strength of an income of £2,154. The authorities of that hospital may find the situation exhilarating. As it has been their condition for some years past, we should think its pleasure must begin to pall. Certainly we hope it will never be a contingency to be faced by our own Hospital in Great Ormond Street.

Major Vaughan Morgan, as treasurer as well as chairman of the Hospital, declares that its future progress must be His plan is this. made on other lines than those. amount required annually to maintain the ward will be about £500; and the sum to be raised is what will add that amount to the yearly income. The friends of the late Dr. BAYES contributed, after his death, the sum of £1,440 towards a memorial to him in the Hospital to which he was devoted, and for which he secured large sums of money. Then, under a resolution of the subscribers to the Medical School, the interest of the "Bayes School Fund," amounting to £1,452 2s., is available, in the event of the work of the school being necessarily limited, for the maintenance of beds in memory of Dr. Bayes, the principal remaining intact as an invested fund, subject to a future possible demand on it for educational work. If the management of the Hospital avail themselves of this provision, while making no change in the present arrangements as to the School, the interest on these two funds will give about £112 per annum, properly regarded as the nucleus of the additional income required for the new ward. What is requisite is, therefore, such a sum as will produce annually the difference between £112 and £500.

The large amount necessary Major Vaughan Morgan proposes shall be raised in the following way. First of all, the gallant Major will himself contribute one thousand pounds, a munificent support of his proposal. The other thousands it is designed to raise by a Bazaar, a Fine Art Distribution, and a Concert of exceptional attractiveness, in the season of the present year, and towards these objects and the "New Ward Maintenance Fund," all who value homeopathy, and rejoice at the present state of progress of the Hospital, are solicited to contribute donations, subscriptions, works of art,

or useful and fancy articles, and to help in all the multifarious

ways which the nature of such a project suggests.

We earnestly hope that the members of the profession will respond to this significant letter in the frank and hearty spirit in which it has evidently been written. VAUGHAN MORGAN has a richly-merited popularity among our body. It is not only because of his invaluable services to the cause of homœopathy, nor the personal liberality with which he supports, as in his present gift of a thousand pounds, his proposals for the good of the Hospital, nor his constant readiness to receive and support by his influence any suggestion in the direction of progress (and these are not small virtues in the chairman of such an institution), but we believe it is because he has, to the absolute exclusion of all personal considerations, one object, and one only, in view -the advancement of our Hospital as the central exponent of homeopathy and testimony to its truth in England, and because he seems to have the rare power of removing those prejudices and easing that undefined professional friction which condemns beforehand many a plan for securing united action. We hope, therefore, that his present urgent and direct personal appeal will have its due reward in arousing among the members of the profession a feeling that the Hospital belongs to them, in a sense not true of any allopathic hospital as related to allopathic medical men. truth is, the Hospital is so firmly established and develops sosteadily that we forget altogether what a reproach to homeopathy would be occasioned if one fine morning we walked down Great Ormond Street and found that its doors were closed. We should then realise that it had been an institution worth a strenuous effort to maintain. That this is now unlikely to happen is, most fortunately, true. But that does not release all those who have chosen to fight the battle of higher and truer medical principles in the United Kingdom from the voluntary duty of inducing the wealthy and the able among their patients and friends to consider the great work the Hospital is doing, and to sustain and extend its operations by the indispensable sinews of war.

# AMERICAN GRADUATES AND ENGLISH DIPLOMAS.

A STUDENT of Michigan University, in the graduation class of 1886, having applied to us for information as to the necessary steps to be taken by an American graduate who wishes to obtain certain English diplomas, it has occurred to us that we might at once answer our correspondent and render a service to many other of our American friends by publishing the information we have obtained in the form of an article in this journal.

The diplomas about which inquiry was made were those of the Royal College of Physicians of London and the Royal Colleges of Physicians and Surgeons of Edinburgh, and therefore we shall deal especially with these in this article. Before admission can be obtained to any examination for a medical diploma it is necessary for the candidate to register as a medical student. Any student or graduate of a foreign university or college who shall have passed the Matriculation or other equivalent examination of his university or college, will be eligible to register, provided such examination fairly represents a standard of general education equivalent to that required in this country. The candidate must produce certificates of having passed such an examination, and must submit to the Registrar a prospectus of the college or other document showing the character of the literary examination that he has passed; and if it is considered of sufficiently high standard—and the standard in this country is not very high—he will be registered as a medical student without further examination. If the Registrar should not consider it sufficient, the candidate will have to submit to one of the examinations in arts the Medical Council recognises. All information on this matter may be obtained from the Registrar of the General Medical Council, W. J. C. MILLER, B.A., 299, Oxford Street, London, W.

Having registered as a medical student, "any candidate" (for the diploma of the Royal College of Physicians of London) "who shall have obtained a foreign qualification which entitles him to practise medicine or surgery in the

country where such qualification has been conferred, after a course of study and an examination equivalent to those required by the regulations of the College, shall, on production of satisfactory evidence as to age, moral character, and proficiency in vaccination, be admissible to the Pass Examination, and shall be exempt from re-examination in such subjects as shall be considered by the Censors' Board to be unnecessary."

This means that a foreign graduate must show that he has passed through a course of study of not less than four years; and if his course has been shorter he must make up the necessary additional time by studying at one of the English schools. Then, if the examination he has passed in anatomy and physiology be considered satisfactory, he will not be required to be examined further in these subjects, but if otherwise, he will. He will then be admitted to the Final or Pass Examination, of which the subjects are-Medical Anatomy and Pathology, and the Principles and Practice of Medicine and Therapeutics; Surgical Anatomy and Pathology, and the Principles and Practice of Surgery; Midwifery, and Diseases peculiar to Women. But the candidate may be exempted from examination in any of these subjects if he can show that he has already passed a sufficiently severe examination in them.

In regard to the diploma of the Royal Colleges of Physicians and Surgeons of Edinburgh (with which is now conjoined the Faculty of Physicians and Surgeons of Glasgow), "the rule is that any medical school which is recognised by the Licensing Boards of the country in which it is situated is recognised by the Board of these Colleges. The examinations of any of the United States Colleges are not recognised here as exempting from any subjects in the examinations, although the teaching may be sufficient." This means that a candidate, after registering as a medical student, must show that he has passed a period of four years in medical studies, and then he will be admitted to the professional examinations of the Board. But he must undergo examination in all the subjects. If he should have

taken his degree in the States after a three years' course he will be admitted at once to his primary examination in anatomy, physiology, and chemistry; but he will have to study for another year before he will be eligible for the final examination.

In the present condition of affairs in this country, where every bar is put in the way of medical students learning homeopathy, there is a great want of practitioners who are acquainted with the system. Consequently there are openings all over the country where able men could make good practices in a short time. This should be an inducement to American graduates to come and settle amongst us; and in order to obtain a legal standing and register as a medical practitioner of the United Kingdom, it would be necessary for the graduate to obtain one of the British diplomas. Any one of them would suffice for this, and the Licence of the Society of Apothecaries of London is the one most readily obtainable. We must, however, defer our remarks regarding this qualification until some future occasion, when we hope to return to the subject.

# NOTES.

THE INTERNATIONAL HOMOEOPATHIC CONGRESS.

THE German "Central-Verein," which holds an annual meeting of its members in some town in the Germanspeaking countries of the Continent, had fixed on Munich as the place of meeting for this year. But we see from the Allg. Hom. Zeit. that a hitch in the arrangements has occurred, in consequence of which the meeting will not be held at Munich, and the selection of some other town is under consideration. If we might be allowed to make a suggestion we would ask the Verein to abandon its custom of meeting at some German town for this year, and to invite its members to meet their brethren from all parts of the world at Brussels, where the International Homeopathic Congress will be held in August—the very month when the Verein usually meets. Homeopathy throughout all

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Europe is at present in such a depressed and oppressed state—in Germany as well as in other countries—that it would be desirable that representative men from all European countries should meet and consider what should be done to promote the spread of homeopathy among the public and the profession, and to counteract the more or less active measures that are being had recourse to by the allopathic faction to ignore or suppress the practice of homeopathy. We do not ask the Central-Verein to do anything we would not do ourselves, but, as our readers know, our annual Congress, which corresponds pretty exactly to the annual meeting of the Verein, is not to be held this year in order to secure a larger attendance of British homeopathic practitioners at the International Congress.

#### LETTER OF HAHNEMANN.

The following letter from Hahnemann to Stapf, in reply to a request by the latter that he would prescribe for his child, whose symptoms he detailed, has not been published in England, though a translation appeared in an American periodical called the *Homœopathic News* in 1855. The letter was written in 1813, when homœopathy was, so to speak, in its infancy, and it shows the carefulness with which Hahnemann selected his remedies, and the pains he took to determine which, among a series of more or less perfectly indicated remedies, were those best adapted for the case.

"Although Nux v. has beads of sweat on forehead, sweat when moving, and generally sweat in sleep—Cham. perspiration especially on the head and temples 1—Puls. sweat during sleep, that goes off on waking—China sweat par-

¹ The symptom of Cham. here referred to is in the original, "Schweiss, vorgüglich des Kopfs, unter dem Schlafen." Hahnemann paraphrases it as above. Allen renders it, "Sweat, especially on the head below the temples;" and in the last English translation of the Mat. Med. Pura it is translated, "Perspiration, especially on the head under the temples." But the original admits of none of these renderings, and is in fact, as it stands, nonsense. The rendering Hahnemann gives in this letter is probably the symptom as it actually occurred, but the translation given by Allen and Dudgeon is on the supposition that "unter dem Schlafen" was a misprint for "unter den Schläfen," though whereabouts in the head is under the temples is not very obvious. It would be well that those who have the English translation should alter this symptom as Hahnemann has here done, and substitute, "Perspiration especially on the head and temples," unless they prefer to take the original in its literal though ungrammatically expressed meaning, "Perspiration, especially of the head, during the sleeping."

ticularly caused by moving (crying), sweat on the head (but also in the hair). The itching of the eyes, which is particularly produced by Puls., with redness on the external canthus when it is rubbed, and sticking together of lids in the morning, points more to Puls., but Ignatia, which also causes itching and redness on the inner canthus and sticking together in the morning, should be preferred if the child's disposition is very changeable, sometimes inordinate gaiety, sometimes peevish weeping, which Ign. causes, and if on opening the eyes in the morning there is great sensitiveness to daylight, which is also produced by Ign.; or Puls. when quiet disposition and tearful mood in the evening, and indeed if the patient is generally worse in the evening. The frequent waking at night points more to Ign. than to Puls., for the latter rather causes lateness of going to sleep. The itching of the nose has been especially observed in Nua v. Nux, Ign., Cham. all have pains when urinating, but the last especially. Puls. has most pains before urinating. The loud breathing has been observed from China and Nux, in the latter especially during sleep. As these medicines (with the exception of China) correspond very much, and one removes the depressing and bad effects of the other, you may judge in what sequence you may elect to give Ign., Puls., Nux, Cham., if perchance the first or one of the others may not suffice alone (only do not let Ign. follow Nux or Nux Ign. immediately, as they do not follow one another well, because they are such very similar medicines). For Cham. there ought to be more nocturnal thirst than there has been and more crossness. China has little affinity to the case, and is therefore not to be selected."

### HOMOSOPATHY SPREADING.

An esteemed correspondent, who has lately had occasion to travel over the greater part of England, writes to us that he has been surprised by finding the use of homœopathic medicines almost universal, and also by the intelligent way in which the virtues of the system are spoken of by the laity. But it has not been a case of "like priest like people." Whilst the laity are enlightened, he has found the medical men of the old school either surprisingly ignorant or else, worse than that, insincere. Plainly it is to the laity that we must make our appeal.

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#### A DANGER.

THE same correspondent warns the leaders of the new movement of a danger they must be prepared for; and his warning is most opportune. There is a good deal of spurious homocopathic medicine in the market, and allopathic chemists are in no way interested in selling our preparations pure. There are a great number of allopathic chemists, our correspondent says, who are selling cheap medicines, such as nux, which they prepare by mixing a few drops of the ordinary allopathic tincture of nux with water. It is well that we should be prepared for this, and put the public on their guard against it, otherwise we may have much of our work undone. Strange revelations have been made of late concerning the making-up of allopathic prescriptions; but with homeopathic prescriptions the care demanded is much greater, and the risks of error when prescriptions are made up by those unacquainted with homeopathic pharmacy are, of course, greater in proportion.

TANGHIN AND ITS ANTIDOTE—A FRENCH DISCOVERY.
WE extract the following from a contemporary:—

"Out of all the trouble and loss incurred by the war in Madagascar the French seem to be overjoyed at having reaped one benefit from that disturbed source. The French doctors have discovered an antidote to the terrible tanghin—the most venomous poison in the known world—which travellers tell us has actually depopulated the island by the abuse made of it by several generations of tyrant governors. The tanghin is the juice of the fruit of the Tanghinia venenifera, and is peculiar in its effect, striking the victim at once, throwing him into immediate convulsions, which last but a few minutes, when death releases him from the atrocious torture he has been made to suffer during that short space. M. de Lassalle declares that in the course of a few years the tanghin had destroyed more than 150,000 persons. According to Ida Pfeiffer, by this poison, together with the warlike expeditions undertaken by Queen Ranavolo, more than 30,000 individuals had perished every year. The dreadful venom attacks the nervous system, beginning with a few minutes of exquisite torture, to end in complete paralysis and death.

"The antidote discovered by M. Quinquand is homosopathic, and said to be the strongest infusion of bitter almonds. The tanghin has hitherto been used as an ordeal, and the extent to which its administration has been carried may be judged by the fact reported by Barbé du Bocage, who relates that Queen Ranavolo, being desirous of surrounding herself with a bevy of young girls from Anossi, sent for six-and-thirty of the most beautiful to be found in that country. Meanwhile, her Majesty having reflected that it might be possible for these young girls to bear her ill-will, she ordered them to be submitted to the ordeal of the tanghin before being ushered into her

presence. Eighteen of the poor young creatures expired then and there, while those who still had power to rise were stoned to death, as not being sufficiently pure to approach her Majesty. The few who recovered were subjected for some time afterwards to all the most horrible symptoms of shaking palsy."

#### A Proving of Bryonia.

THE following is from the London Medical Record of 15th March:—

"Dixson on Poisoning by Bryonia.—The patient, a man aged sixtythree, had taken by mistake about eighty drops of the homocopathic tincture of bryonia. Two hours later, having been quite calm and comfortable in the interim, he felt an uncomfortable, tickling, warm sensation in his throat, and then began to vomit. Within a few minutes after the supervention of the vomiting he became oblivious of his surroundings, having a feeling as if a piece of gauze had been drawn over his face. He then remembered nothing more, until he heard Dr. Dixson calling him by a wrong name on his arrival. His pulse was imperceptible at the wrist; he was drowsy, livid, and covered with a cold perspiration. There was no diarrhoea, nor did he complain of any pain. The patient was decidedly delirious, but could be induced to give some kind of answer to a question. After persevering in the use of strong stimulants, coffee, ammonia, etc., with warmth to the extremities, the patient recovered in about an hour and a half."

#### CONSUMPTION AND GERMS.

THE poverty of allopathic therapeutics is strikingly shown by the readiness of allopathists to rush after every so-called scientific nostrum that is started. An ingenious Italian, Dr. Cantini, started the notion that it might be possible to adopt the tactics of our generals in the Soudan of fighting hostile Arabs with Arabs who were "friendly," in the treatment of consumption. The hostile bacillus of consumption might be attacked by the friendly bacillus or bacterium which rejoices in the surname of termo. This discovery so excited a gentleman practising in Islington, Liverpool, that he lost no time in ascertaining the particulars of the treatment and putting them to a practical test. As soon as he had half a cure to boast of he wrote off to the Daily News (in which journal he had seen the first intimation of the "discovery") to express his gratitude to the editor in terms which would have made the late Professor Holloway blush had the letter been addressed to him in praise of the efficacy of his pills. Phosphorus, Iodine, Arsenic, Calcarea are far too common for "modern Naamans," as they have been described, who must have some "great thing" in the way of treatment before they will condescend to notice it. For our part, we would not exchange any one of the remedies we have named for all the "friendly" bacilli that have ever been heard of.

# Dr. LAUDER BRUNTON'S BOOK FROM AN ORTHODOX POINT OF VIEW.

We are glad to see in the Medical Press for March 24th a letter signed "An Anxious Inquirer," asking a few pertinent questions in reference to Dr. Lauder Brunton's Pharmacology and Therapeutics. The writer, like some other people, fails to see the connection between Dr. Brunton's elaborate experiments on animals and his therapeutic applications. Regarding Staphysagria he says:—

"I suppose it is my stupidity, but for the life of me I cannot see the connection between the power of the drug over respiration, cardiac muscles, and ends of the vagus, and its therapeutic use for killing lice; for one does not much care whether the lice are killed by paralysing their respiration or their spinal cord, or the ends of their vagus, provided they are killed. So all this pharmacological knowledge so laboriously acquired is merely useless in reference to the sole therapeutic use of stavesacre—to kill lice."

The letter concludes as follows:—

"Is it true that Dr. Brunton, an examiner in materia medica at the Royal College of Physicians, which, as is well known, lately passed a by-law forbidding all professional intercourse between its members and homeopaths, has actually introduced almost the whole homeopathic treatment into his highly-extolled book without giving an inkling of his intention? Dr. Brunton is bound to give us an explanation of his extraordinary conduct, if what my friend says of his homeopathic therapeutics is true. I got his book expecting to find in it the latest developments of scientific and rational medicine, and I do not approve of having homeopathic therapeutics surreptitiously forced upon me."

We shall be interested to see what reply Dr. Brunton will make to this.

## HOMOSOPATHY AT NICE.

We very much regret to learn of the death of Dr. Guerrier, the homoeopathic practitioner at Nice. Dr. Guerrier's death will leave Nice without any medical representative of our school in that city, for Dr. Proell, who has hitherto spent the winter season in Nice every year, will after this year no longer be able to do so. Dr. Proell is going to settle at

Meran, the well-known winter resort in South Tyrol. He is obliged to leave Nice because his son has to enter a public gymnasium in Austria. At Meran there are 5,000 visitors annually and 20 medical men. Not one of them is a homeopathist, so Dr. Proell will have a large field before him, and we have no doubt he will speedily secure abundance of public support. Our school will have in him a worthy representable tive. Dr. Proell will take up his abode there in October next. In the summer Dr. Proell will be at Gastein as formerly.

# HOMOGOPATHY AND THE MASSACHUSETIS STATE BOARD OF HEALTH.

THE Massachusetts Homeopathic Medical Society, at a meeting held in Boston on February 11th, 1885, passed a vote that in the event of the formation of a State Board of Health it was highly desirable that the three incorporated medical societies of the State should be represented, and that it should not be formed by the members of one medical society only. Since then the appointment of a Board has been taken up by the Massachusetts Medical Society (allopathic), and numerous petitions have been presented to the Legislature in favour of the object. The Homeopathic Medical Society has therefore presented a petition praying that all three State medical societies—the Medical Society, the Homeopathic Medical Society, and the Eclectic Medical Society may be represented. The text of the petition we hope to publish next month. We should think that the Massachusetts Legislature will not refuse so reasonable, strong, and just an appeal. The petition is signed by Dr. Talbot and four others.

## "AT LAST!"

Dr. Dudgeon's letter to the President, Censors, and Fellows of the Royal College of Physicians, published in our March number, has been re-printed as a pamphlet under the title of—At Last! The Royal College of Physicians Converted to Homeopathy, and is published by the Homeopathic Publishing Company. It may be had of all homeopathic chemists, one penny for a single copy. The publishers will supply it at eightpence for twelve, and four shillings for one hundred copies. Every medical man ought to read it, and all who have acquaintances among allopathic doctors should make each of them a present of a copy.

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#### HOMEOPATHY AT THE RICHMOND ATHENEUM.

THE Richmond Athenseum has set a good example. Thames Valley Times of March 17th contains an account of an admirable paper read before this Society by the Rev. G. S. Ingram, on "Homeopathy: has it a Scientific Basis?" The chair was taken by the Rev. Astley Cooper. Ingram had a strong case, and did full justice to it. briefly sketching the history of the origin of homeopathy, he described the principles and peculiarities of homeopathic practice, and showed that they all had solid foundation in scientific facts. He quoted from the Medical Times the lament of that journal over the adhesion to homoeopathy of such men as John Bright, Lord Beaconsfield, Earl Cairns, He also went largely into and Sir William Siemens. statistics. Dr. Bateman, who replied, repeated the usual silly misrepresentations of homeopathy and its founder, of which this may be taken as a specimen:—Hahnemann "was a lunatic, and started a lunatic asylum on the principle that like cures like." The general opinion of the meeting was (as we understand) that Dr. Bateman did not increase his reputation for wisdom. We hope our LEAGUE may be instrumental in starting this subject at many scientific and literary societies like the Richmond Athenæum.

### Hahnemann Anniversary Dinner.

A good old custom is to be revived this year. The memory of Hahnemann is to be celebrated on his birthday, April 10th, by a dinner to be held at the Holborn Restaurant. It has been arranged by the members of the British Homeopathic Society, but friends of the members will be welcomed also. Meetings of this kind for social intercourse, especially on occasions when our differences can be sunk in sentiments which we all hold in common—such as our gratitude to our Master—are of the greatest possible good, and should be encouraged in every way.

### BRITISH HOMOSOPATHIC SOCIETY.

On Thursday, April 1st, Dr. Dudgeon will read a paper entitled Thoughts on our Materia Medica, suggested by work on the Cyclopædia of Drug Pathogenesy.

# ORIGINAL COMMUNICATIONS.

### THE MATERIA MEDICA OF ASCITES.

By GEORGE W. WINTERBURN, M.D., New York. (Read before the New York State Homosopathic Med. Soc., Feb. 9, 1886.)

Ascites being a condition and not a disease, it has no true This condition may be caused by degeneramateria medica. tive changes in the peritoneum, by obstruction in the portal circulation, by diseases of the heart, kidney, liver, spleen, lungs, larnyx, or be consecutive to intermittent fever, the cancer cachexia, or other morbid states. Several of these causes may exist in any given case, and great difficulty be found in tracing the genesis of the disorder. In selecting the proper remedy in any individual case, it is, therefore, essential to examine minutely the condition of all the viscera which might be involved as part-cause in the production of the leaking of the blood-serum into the peritoneal cavity. From this it is evident that the materia medica of ascites contains every remedy upon the general list. And, on the other hand, it cannot be said that we have any homeopathic remedies for ascites, for, as far as known to me, no drugcauses ascites as a definite factor of its pathogenesy.

Our cures of ascites are purely empirical, as far as that condition is concerned. The prescription to be homocopathic must be based on symptoms exterior to the peritoneal sac, and not dependent upon its contents. This fact has led to the use of a wide range of remedies by homocopathists, a range so wide indeed as to include such dissimilar drugs as spis and iris, ceps and erigeron, digitalis and cantharis, drugs nevertheless which are capable of achieving the most marvellous results when homoeopathically indicated by the

concomitant conditions.

The chairman of this bureau has set me an impossible task. A materia medica of ascites cannot be constructed, in the The best that can be present state of our knowledge. done is to mention those drugs which clinical experience has demonstrated to be useful, and to give under each heading the more probable conditions under which it may prove homosopathic.

Sulphur.—In beginning the treatment of a case of ascites

probably no remedy is so generally useful as sulphur.

The patient has probably been suffering from some organic disease for some time; the abdomen begins to swell, and distress is thereby caused; and it is for the removal of this

symptom that the patient applies for treatment. While the patient is anxious to get rid of his dropsy, and looks upon that as the principal part of the disease, and in fact as the only one of particular importance, we cannot keep too clearly before our minds the remembrance that with the dropsy we have really nothing to do, that it is merely a secondary condition, which will disappear as soon as that viscus, upon whose disordered action its existence depends, has been relieved from the incubus of deranged functional action, initiated by some still more remote morbific influence.

Now while sulphur contains in its pathogenesy not a hint of any ascites-making power, the rumblings and gurglings, the pressure, fulness, and tension, all being due to intraintestinal disturbance, yet its profound influence over organic life makes it often, if not homeopathic in the strict sense, yet the one remedy of all others capable of arousing that vital reaction upon which cure ever depends. Dr. Wurmb, of Vienna, thus states the basis of its value in this and other exudations:-"Sulphur penetrates the entire organism even in its finest and most recondite portions. It increases the activity of vegetative life generally, and of the processes of secretion and absorption in particular. It accelerates the interchange of elements and makes it more pervading; in a word, it fulfils all the demands upon which the removal of pneumonic infiltration, of serous exudations, and of old as well as recent deposits in the skin, the parenchyma, the joints and the bones." It would be, however, a mistake to prescribe sulphur merely as a routine drug. If the symptoms in the case at hand are not found under sulphur, I should hardly expect curative action to follow its administration, but should then search for that remedy which was most clearly affiliated to the case. It will often happen that a remedy so selected fails to awaken the anticipated vital reaction. In this case a single dose of sulphur may start the wheels in motion, or cause the development of new morbid phenomena, by which the drug demanded by the system may be made known.

Arsenicum, next to sulphur, is probably of most frequent service. When indicated by the concomitant symptoms, it will be found useful in post-scarlatinal cases; in complication with heart disease, liver derangements, and other visceral disorders; and in the ascites of drunkards. Though a useful remedy, it would be unwise to overrate its power in ascites. Of all the forms of dropsy, arsenicum has least influence in

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dropsy; nevertheless, I never hesitate to use it when nervous restlessness, sudden sinking of strength from slight causes, violent thirst easily quenched, and burning sensations and pains in various parts, form the outlines of the pathogno-

monic picture.

Apis acts with great celerity in ascites caused by, or remaining after, peritonitis, and in that very rare form, the post-scarlatinal; but it cannot do here what it does in the various cedematous conditions of the mucous and cutaneous surfaces. Over those forms of ascites caused by portal stagnation, cirrhosis of the liver, cardiac degeneration, and lung affections, it has either no influence or merely a palliative and temporary one. If ascites, as is claimed, issometimes a primary peritoneal disorder, arising from exposure to damp and cold, the irritant action of apis upon the serous tissues, and its ability to set up a condition of Bright's disease of the kidney, make it a very hopefulremedy in this acute febrile form. I have never seen such a case; but I can imagine that a peritoneum already tending to an abnormal state by the presence of congestion or inflammation in the neighbouring uterus or ovary, might feel thus the effects of an exposure to inclement weather, an effect which, resulting in increased functional activity of the epithelial cells, might lead on to effusion. It would seem asif ascites had in isolated cases been caused in some such way.

Apocynum Cannabinum seems to have a more direct relation with ascites than most of our so-called dropsy remedies. in a few other of our vegetable remedies, the infusion acts better than the tincture, and if the dilution required can be

prepared from this extemporaneously, all the better.

Apocynum acts best in ascites due to torpor of the kidneys. associated with a like condition of the sweat glands. In organic disease of the kidney it has only a temporary and palliative effect, and if the attempt be made to push it in farge doses, as is occasionally done, it will prove actually deleterious. In ascites from cardiac disease it will perhaps decrease the amount of intra-peritoneal effusion, but cannot reach the real source of the disorder. The apocynum patient. has many symptoms resembling the case demanding arsenicum. Thus there is restlessness with debility, violent thirst, oppression and dyspnesa, and scanty urination; but apocynum not only covers a much narrower therapeutic rangethan arsenicum, but the restlessness is not so uncontrollable. the debility is not so profound, the thirst is not so urgent,

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and the dyspnœa is less alarming. Apocynum is rarely indicated except when the skin is unduly dry, and, generally, as the first evidence of its curative power the skin becomes moist, and this may (under the potentised drug) go on to

actual diaphoresis.

China is the prince of remedies when the ascites is caused by an impoverished state of the blood, whether this arises from actual blood loss, or from the inability of the digestive apparatus to reduce the food to an assimilable condition, or from lack of trophic power of appropriation. This anæmic condition is almost necessarily associated with functional disturbance, organic changes in the liver or spleen, and this is an added reason for the use of this drug. China is of most service in cases of ascites occurring in elderly persons, or persons prematurely aged by excesses. In ascites following parturition, or consecutive to prolonged retention of the fæces, or associated with jaundice, china is a hopeful remedy. Just how much good might be expected from china in ascites appearing as a consequence of living in a malarious climate I am unable to say, as the intermitting complaints we are called upon to treat in New York never in my experience call for the use of china, unless they have already been drenched with quinine, and very rarely then.

Helleborus congests the kidneys; a condition subsequently followed by inability to perform their functional duties. seems best suited to suddenly occurring dropsies, and to melancholic, epileptic, and scrofulous persons. The mental symptoms will indicate the remedy in those cases which demand its use. These are thus described by Hahnemann in a footnote to the proving: "I conclude from various observations that stupor, blunting of the general sensibility, a condition in which, with unimpaired vision, the patient, nevertheless, sees imperfectly and does not regard the object he sees; with the apparatus of hearing intact, yet hears nothing distinctly nor comprehends; with his organs of taste in working order, yet finds not the proper taste in anything; is always or often distraught, hardly remembers, if at all, the past or what has just happened; has no pleasure in anything; slumbers but lightly, without a sound or refreshing sleep; undertakes to work without having power or strength to attend to his work,—these are the characteristic primary effects of hellebore." The choice will often have to be made between helleborus and arsenicum; the former will be needed when the mental attitude is one of

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stupor, the latter when nervous erethism drives the patient. to aimless restlessness.

Chimaphila has shown a relationship to the remote effects. of scrofula. In its primary action it stimulates the kidneys and causes frequent urging to urinate. In several cases it causes greenish urine, but this may be only the result of elimination of the drug through the kidneys. In ascites consecutive to Bright's disease, when the urine is scant and contains a large quantity of muco-purulent sediment, chimaphila may be of service. Obstinate constipation and anorexia seem to be reliable concomitants, especially in constitutions broken down by intemperance. When urination is painless, or of ordinary frequency, this drug is not indicated; in fact,. vesical irritability is a constant accompaniment of the renal disturbance. Chimaphila cured a case of ascites with anasarca, in which apocynum had been of benefit, but did not oure. Kalmia and rhododendron are therapeutic analogues.

Colchicum is a probable remedy for ascites in the gouty diathesis, especially in those cases in which severe physical. depression is accompanied with unaltered mental lucidity and alertness. Here, as in chimaphila, there is apt to be vesical. irritability, and this may go on to strangury with bloody, ink-like urine. The patient is very sensitive to changes in the weather, and is always worse when this is damp, and also in the autumn and spring. Dr. McGregor reports a case in an old lady of eighty-five, with great swelling of the lower part of the abdomen, causing a fold or crease below the umbilicus, and extending across from side to side. Colchicum follows well after lycopodium, and is followed by carbo vegetabilis. It has cured cases after the failure of apis and arsenicum.

Erigeron has a powerfully destructive influence on the kidney, and is thus a useful drug in some varieties of Bright's disease. How far this knowledge of its action may be of benefit to us in the treatment of ascites is yet to be determined; but when this disorder is associated with bleeding hæmorrhoids, congestion to the head, suppressed, or strong-smelling, urine, and a general hæmorrhagic ten-

tency, erigeron is probably homeopathic.

Dulcamara is of doubtful applicability in this condition, though its alkaloid—solania—has produced hyperæmia of the kidney, with albuminous urine. Its acknowledged power in controlling the influence of damp cold on the human system, may make it homeopathic in those cases of primary ascites due to engorgement of the kidney, caused by this untoward influence. Vitiated states of the blood, which are benefited by increasing the activity of the secretory apparatus, are amenable to the influence of this drug; but it can hardly be claimed as one of the important remedies in ascites.

Lycopodium renders the processes of digestion and elimination slow, and they are but imperfectly executed; whence come accumulations and the accompanying aches and pains. The mental processes are also indifferently performed, especially those that concern everyday affairs; but the mind is not actually weakened, for as soon as some important subject is broached it becomes alert, takes cognisance of the new topic in all its aspects, and grapples with the emergency with energy and enthusiasm. In the lycopodium case the hepatic region is very sensitive to touch and motion, flatulence abounds, and a feeling of tension around about the abdomen is a usual and an annoying symptom.

Asclepias Tuberosa has much less influence over effusions into the peritoneum than of those within the pleura, where its influence is almost specific, and it will probably not cure ascites. But the A. syriaca is a potent diuretic, increasing the solid constituents of the urine as well as the watery portion; and where suppressed perspiration has caused renal inflammation, and thus induced ascites, this remedy may prove even more available than apocynum. Headache is

an important factor in the asclepias case.

Bryonia is of less value in ascites than in hydrothorax, but Lilienthal recommends it here when the effusion is associated with congestion to the head, giddiness after stooping, loss of breath when moving in the least, great thirst with scanty urination, and obstinate constipation.

Digitalis is useful in ascites from an irregularly acting and weakened heart, with lividity and jugular fulness.

Cyanosis is ever a prominent indication for this drug.

Kalmia is of superior value in rheumatic affections of the heart, especially when associated with albuminuria. Ascites occurring in a rheumatic subject, when the heart has been impaired, and a large percentage of albumen is transuded through the tubuli of the kidneys, would be benefited, and probably occasionally cured by kalmia; but the prognosis is necessarily grave, and well indicated remedies often, instead

of curing, seem to accelerate the downward course of the

patient.

Ledum may be serviceable in ascites associated with the gouty diathesis. A prominent sympton is constant chilliness, though at midnight there may come a sense of suffocation and of heat, the patient throwing off the bedclothes, and becoming very restless. The ledum patient is morose, discontented, and displays a peculiar intensity of feeling on any topic upon which his attention may be momentarily concentrated.

Mercurius through its pervasive influence upon the liver and other viscera, and the power it possesses of restoring their functional integrity when not too seriously impaired, and if even in some cases reversing morbid metamorphoses, is often of great service in the treatment of ascites. There in, when mercurius is indicated, very little thirst, the abdomen is tense and hard, the urine is scant, turbid, and albuminous, the skin is clammy, and the physical prostration profound and deathlike.

Sepia markedly diminishes the quantity and increases the specific gravity of the urine. It also produces portal stasis and all the prominent symptoms of torpid liver. should make it of value in cases of ascites possessing prominent characteristics of sepia, but I do not know of its

ever being so used.

Eupatorium perf. and Iris are drugs having considerable power over the liver. The former is analogous to bryonia, but the patient is restless. Iris has been called the vegetable mercury. It influences the pancreas, however, much more markedly than does mercury, and indeed more than any drug on our list. Ascites with salivation would point

to iris as a probable remedy.

Senecio is of undoubted value in dropsy occurring after suppression of the menses. Prof. A. E. Small reported a case of ascites benefited by senecio after apis and apocynum had failed. Senecio has also cured cases caused by renal inflammation, where it seems to be a remedy of real value. The characteristic symptoms have not been very definitely determined, and its use has been largely empirical, but sleeplessness, hysterical nervousness, and mental irritability seem to be prominent factors in its pathogenesy.

Helonias is useful in uterine and stomachic atony, and in dropsies following uterine hæmorrhage and associated with

gastric torpor, or concomitant with chlorosis, has shown

curative power.

Convolvulus differs from helonias in having a good appetite. The patient would eat more if he had room, but the abdomen being full of water acts as a restraint. This is a very different condition from the iodium voraciousness. In the convolvulus case the urine is scanty, the bowels constipated, and muscular strength deficient.

Asarum may be of service in cases caused by alcoholism. Its general symptoms are chilliness, dulness of the special senses, and myalgia in those parts where muscular tissue is

plentiful.

Fluoric Acid is usually beneficial in cases dependent upon the hob-nailed liver of drunkards; Manganese, when, with irregular action of the heart, the cardiac sounds remain normal; Lachesis, when the urine is not only scant, but black; Kali Carbonicum, when sharp stitching pains in various parts are associated with violent palpitation of the heart and a feeling of coldness in the abdomen; Asparagus, when a wax-like appearance of the face is associated with a yellowish, offensive urine.

# VASCULAR DEAFNESS.

DR. ROBERT T. COOPER has been contributing articles to the Dublin Journal of Medical Science of the past year on the subject of a kind of deafness first described by himself. The full title of his article is as follows:—Basic Aural Dyscrasia; being an inquiry into a condition of system disposing to Aural Disease, now for the first time described as the Basic Aural Dyscrasia, involving an explanation of the mode of causation of Tinnitus Aurum, and a description of a hitherto unnoticed form of deafness—Vascular Deafness.

Dr. Cooper has noticed that many cases of deafness that come under his care are associated with the presence of either arterial or venous bruits, or both, in the neck, and that these cases have a history different from the history of cases of nervous deafness. Dr. Cooper thus defines vascular deafness:—"By vascular deafness I mean a variety of impaired hearing, unattended by visible alteration of or destruction in the tissues of the ear, and not fairly ascribable to the blocking up of the external meatus or of the Eustachian tube, nor to hyperplasia of the anatomical elements of the middle ear, nor yet to paralysis of the auditory nerve."

In a paper published in the Lancet<sup>1</sup> of August 29th Dr. Cooper thus describes the three kinds of deafness:—

"First, then, as to the obstructive deafness, or rather obstructed hearing. Typical examples of this are found in connection with ceruminous impaction of the meatus and catarrhal blocking up of the Eustachian tubes. Such lesions may for years deprive the ear of its hearing power, and I am sure the statement cannot be controverted that on the whole these forms of obstruction can be easily and simply dealt with. So that it follows that, as far as these affections are concerned, disease may deprive the ear of its functions to a greater extent and for a longer time than is common with any organ of the body, and yet such disease may constitute an easily and perfectly remediable affection, much more so than is the case with any other organ. Obviously, therefore, the diseases of the ear thus far compare favourably, in a therapeutic point of view, with other organs. Correct diagnosis of obstructed hearing is formed chiefly from local examina-tion and from the history of the case. But it is well known that these are not the only forms of aural obstruction met with; we may have to encounter an actual stiffening and thickening in the middle ear structures, or embolic impaction in the bloodvessels. These are equally intractable, but probably not more intractable than similar affections of other organs, and, besides, they are outside the scope of our present inquiry.

"We now come to the exhausted hearing. This belongs to nervous deafness properly so called, and is to be diagnosed, firstly, by the history of the case, and, secondly, by the symptoms present. Both these are very characteristic. In this respect the ear takes its place in medical science along with the spine. In the diseases of both these parts the history and the symptoms are of unusual importance to us in forming a correct diagnosis; indeed, the ear ought to be looked upon as much more an appendage of the spine than of the brain. It is probably in as great, if not greater, sympathy with the former than the latter. The history of the exhausted hearing is that of a sudden and pronounced deafness, generally attended with a sense of numbness and deadness of the ear, that comes on suddenly after an overpowering and exhausting mental strain. The condition that results seems to be one more allied to paralysis than anything else; it resembles the retention of urine that arises after a mental shock, and that is owing to paresis of the detrusor urinæ apparatus. Further, there is often a history of the patient having had similar seizures; it is therefore usual to find a history of other seizures of deafness or of temporary nervous imperfections of other organs. This exhausted hearing is, then, characterised by coming on suddenly and by occasioning a high degree of deafness in a short space of time, and also I may add by disappearing with equal suddenness. This feature is often not elicited until we have closely and earnestly interrogated our patient. So that the obstructed hearing and the exhausted hearing agree in this, that the deafness is from the first considerable and the onset sudden, and the dispersion is often equally sudden in both forms. Then as to the tuning-fork; it is well known that dulness of perosseous hearing characterises nervous deafness, and this feature is of great value in

<sup>&</sup>lt;sup>1</sup> Since reprinted and published by the author as a pamphlet, entitled. Notes on the Deafnesses. London. 1885.



forming a diagnosis. It is, however, not an invariable or a necessary feature of the early stages of nervous deafness, and impaired perosseous hearing is certainly not in all cases to be accepted as justifying an unfavourable prognosis. Then as to treatment: while nervous deafness, like obstructed hearing, may disappear suddenly, we cannot assign the period at which its disappearance may be counted upon. This, of course, is unsatisfactory; but it is not a little encouraging to find in pilocarpine, subcutaneously injected, a most promising remedial agent, and one that, in Dr. Barr's hands, has proved rapidly remedial.1 Gelsemium, too, has, in my hands, effected great things; and I can aver that there are a train of symptons in every way resembling those of Ménière's disease, but in which there is a nervous history, and in which this very valuable remedy proves curative. Dr. Sydney Ringer' testifies to its efficacy in Ménière's disease, and I am. sure it is in those cases in which nervous manifestations predominate in which it is so beneficial. My own experience, as well as a consideration of the nature of the affection, goes to prove that nervous deafness is quite as curable as are the nervous seizures of other organs.. Thus far I have shown that, as with the bladder we may have retention of urine from urethral obstruction or vesical exhaustion, so with the ear we may have abolition of its chief function, either from mechanical, tubal, or meatal obstruction, or from widely-spread nervous exhaustion.

"The third form of deafness is the enfeebled hearing or vascular deaf-This, which I have described in these papers for the first time, I have shown to arise from imperfection in the muscular coats of the bloodvessels supplying the ear, and that its onset is referable to the consequences of an irritation that has lingered, it may be for years, upon the costs of the larger bloodvessels, and which extending tothose of the ear, gradually saps from them the vigour necessary for the maintenance of the healthy activities of the organ, and this, too, without the patient being in the least cognisant of the terrible mischief that is brooding. Consequently, I look upon it that this enfeebled hearing is simply the expression of long-continued irritation that has seized upon the aural vascular parietes; that it is thereforealmost invariably accompanied, whether deafness be present or not, by venous and arterial bruits, which can be readily detected by the stethoscope in the cervical bloodvessels; and that by paying attention to the condition of these blood-carrying channels we can often anticipate, and therefore forestall, the coming on of this the most intractable form of deafness. Compared with other organs this very commonly met with enfeebled hearing furnishes us with an affection more tedious of cure than are similar diseased states of other viscera; its obstinacy would seem to be principally accounted for by the peculiarly broken up character of the aural circulation. It certainly is not an incurable affection. In this disorder, therefore, speaking broadly, but in this only, we find the diseases of the ear to contrast unfavourably in point of obstinacy with those of other organs of the body; and the fact that we are in a position to predict and to forestall its occurrence more than makes up for its inveteracy when a confirmed affection. Besides, I have great hopes that, like many

<sup>3</sup> Manual of Therapeutics, art. Gelsemium.



<sup>&</sup>lt;sup>1</sup> British Medical Journal, June 13th, 1885.

other affections that once were deemed incurable, its intractability will soon be a thing of the past. When both ears are affected—and it is more common to find both engaged in vascular than in nervous deafness,—I have noticed that the left is generally the deafest ear in vascular deafness, the right in that due to nervous causes; it may certainly be taken as the rule that the force of the blow is more unequally felt in nervous deafness, and that in general it is the right ear that suffers the more severely."

In the Dublin Journal Dr. Cooper writes on the action of remedies on the ear as follows:—

"Were we discussing the action of medicinal agents upon the ear, the distinction between these two forms of deafness [nervous and vascular] would receive additional and more pointed illustration. In regard to the stimulative, non-nutritive agents man selects for the refreshment of his system, nature seems to prompt him to make use of those that minister to the nervous as well as the vascular sphere of his organism, and it is probable that indulgence in alcohol is more hurtful when taken by itself than when, side by side with it, the modifying power of tobacco is called into play; and so, vice versa, Mr. Jonathan Hutchinson suspects tobacco amaurosis to be more common in teetotallers than in those accustomed to a moderate use of alcohol. Similarly quinine and iron represent both spheres of action; and in chemical combination we get a remedy which seems to combine an action upon both departments in the picrate of iron. This has, of course, to establish a reputation, but from practical experience I can without hesitation prophecy for it a brilliant future. The pathological indication for the picrate is the presence of a considerable amount of hepatic inertia, coated tongue, constipation, dark circles round the eye, and a bilious complexion—a counter irritation the presence of actual chlorosis, and not, be it remembered, of mere anæmia. I give these indications, I may say, en passant, entirely upon my own responsibility. It is probably the only preparation of iron that has a decided hepatic action."

Dr. Cooper works out his point with great force and skill, and much of his argument will carry conviction at once. How far he has succeeded in determining the clinical value of the arterial and venous bruits it is too soon yet to say. Indeed, the actual causation of them is still much of a mystery. Sometimes, doubtless, they may depend on the state of the blood, sometimes on the state of the vessels—their formation, contraction, dilatation, or the condition of their coats; or again, from pressure upon them from without, as in listening with the stethoscope. What Dr. Cooper seems scarcely to have take account of is the fact that in many cases where the bruits are present there is no deafness, and that where the bruits have persisted for a long time.

<sup>&</sup>lt;sup>1</sup> The *Picrate of Iron* is soluble in about 1 to 50 of water. This solution is of a yellow colour and very bitter.



In any case, however, Dr. Cooper has given a great impetus to the study of these conditions. We will conclude this notice with a quotation of a practical nature from the June and July numbers of the Dublin Journal:—

"Dr. Edward Hamilton, of Dublin, used at the bedside to well observe that the surgeon is seldom placed in a position so uncertain and unscientific as when, face to face with an inflammation, his opinion is called for in the determination of the simple question whether cold or hot water will prove the more efficacious. This difficulty is an undoubted one, as we encounter it upon a large scale in the medical and surgical wards of a hospital. It does not apply, however, to the inflammatory conditions met with in the ear; for here we deal with an inflammatory action, the drift of which is dis-

tinctly, from first to last, retrograde and debilitating.

"The chronic diseases of the ear, and we believe, but to a less extent, the womb as well, involve these organs in an inflammatory process that requires for its successful dispersion the application of as much warmth of every description as possible; at all events, warmth constantly and perseveringly applied is essential for the complete rehabilitation of the ear when it has been subjected to a long continuance of the exhausting and degenerating inflammations that affect its circulation. This I would lay down as a clinical axiom as irrevocable as it is possible for laws in such cases to bethat all ear diseases, whether acute or chronic, are improved by the application of warmth, and aggravated by that of cold; and I believe, in making this statement, I am largely, if not unanimously, supported by all distinguished aural physicians. Thus, Dr. A. Guye. of Amsterdam, says:—'I have seen people with a slight growth of hair, in whom the wearing of a wig was followed by decided im-provement in hearing. And what,' he asks, 'is more natural than that an organ which, in its normal condition, is so little exposed tovariations in temperature, should endure such exposure badly, and undergo a loss of its functions?""

## HOMCEOPATHIC LEAGUE—PROSPECTUS.

[THE following Prospectus has been sent to every practitioner and chemist whose name appears in the *Homeopathic Directory*. The prospectus was accompanied by the subjoined circular, and the honsec. will be happy to receive subscriptions from any readers who may not have seen it, and may wish to join the League.]

# PROPOSED HOMEOPATHIC LEAGUE.

Homeopathy has now been publicly taught and practised in every quarter of the globe for more than three-quarters of a century, and is the only rule of general application for the treatment of disease by drugs. The experience of thousands of medical practitioners has proved it to be greatly more successful in the treatment of disease than any other method; and its influence on the ordinary treatment has been shown by the abandon-

ment of most of the violent practice which was in vogue at the period of the introduction of homosopathy, such as blood-letting, leeches, cupping, counter-irritants, setons, issues, mercurial salivation, etc., and by the adoption by the old school of many of the remedies which were introduced into medicine by the method of Hahnemann.

Yet, in spite of the improvements in general medicine that have been effected by homoeopathy; in spite of the many valuable remedies that the old school has borrowed from homosopathy; in spite of the superior results of the homeopathic treatment of the most serious diseases, such as inflammations, fevers, and cholera, as proved by the statistics of hospitals and private practice, medical men who acknowledge the value of the homosopathic rule of treatment are excluded from medical societies, from hospital appointments, and from public posts; they are refused permission to advocate the claims of homocopathy in the medical periodicals, or to reply to misstatements and misrepresentations of homocopathy in these periodicals, and are still treated by their old school colleagues as though they were charlatans and unworthy to receive ordinary professional courtesy. Societies, Colleges, and Universities pass resolutions and enact by-laws denouncing homosopathy as "unscientific" and "irrational," and forbidding consultations and professional intercourse with its practitioners. Professors at the universities and lecturers at the medical schools never mention the subject of homeopathy without burlesquing its doctrines and holding them up to the ridicule and contempt of their audiences. Advertisements of homoeopathic works are denied insertion in medical periodicals, and no mention is made of the homogopathic works of medical men whose names appear in the medical directories. On the other hand, the very tradesmen who will not publish works teaching homeopathy, never hesitate to issue books containing the most monstrous and grotesque misrepresentations of homeopathy, written for the purpose of prejudicing the nonmedical community against the system of Hahnemann.

In the early days of homosopathy in this country, when the medical practice of the majority consisted chiefly of the violent and painful measures before alluded to, the pioneers of homosopathy addressed themselves chiefly to the public, and sought to influence the profession through their patients. In this they were successful. The people having been taught by popular books and pamphlets and by popular lectures the better, milder, and more rational mode of treating disease, were unwilling to submit to the severe and irrational treatment then in vogue, and medical men were thus led to abandon their traditional methods and to adopt a more gentle system. As they also borrowed from homosopathy many of its remedies, the practitioners of homosopathy hoped that the medical opposition to Hahnemann's system



was about to cease, and they refrained from those popular appeals to the public which were at first so successful. But when the people were no longer appealed to, and when no pains were taken to enlighten and instruct them, their interest in the subject gradually subsided, and a generation grew up which knew little or nothing about the real nature of homosopathy or the comparative merits of the two schools. Thus, the pressure from the public having declined, the general body of the profession made no further effort to improve their practice in the direction of homosopathy, or even to learn what homosopathy really is. Misrepresentation acting on ignorance has of late years hindered the progress of homosopathy in this country, and though it is, undoubtedly, the truth in medicine, and as such cannot perish, its general acceptance may be delayed unless efforts are made to dispel the ignorance respecting it.

Some friends of homoeopathy, lay and medical, think that an endeavour should be made to enlighten the public as to the true character of the homoeopathic system, and the unfair manner in which it is misrepresented and sought to be stifled by the dominant majority of the old school. It is therefore proposed to establish an Association to be called *The Homoeopathic League*, whose objects will be to spread a knowledge of homoeopathy among the people by means of pamphlets, books, public meetings, lectures of a popular character, and such other means as may from time to time appear desirable, and to counteract the

unfair treatment to which it is subjected.

In order to do this effectually they invite the co-operation of all who, being assured of its truth, are interested in the spread of homeopathy. They propose that this League shall include not only medical men and chemists specially concerned with homeopathy, but all who desire the spread of the most scientific, rational, and efficacious mode of treatment of disease, and who wish that it shall not be unfairly treated.

## OBJECTS AND RULES OF THE LEAGUE.

PROPOSED :-

I.—That an Association be formed, to be called "The Homoco-

pathic League."

II.—That the objects of the League be—(1) To make known the truth of Homeopathy, and the advantages to the public of Homeopathic treatment; and (2) To counteract the unfair policy of the Old School.

III.—That the League consist of a President, Vice-Presidents, Executive Committee, and ordinary members, and that ladies be eligible for membership. That Branches be formed in provincial towns.

IV.—That membership be open to all persons, lay or medical, on payment of a yearly subscription of not less than kalf-acrown.

V.—That the means to be adopted by the League be the production and distribution of literature, public meetings, popular lectures, and such other means as the Association may deem desirable.

VI.—That the government of the League be vested in a-Central Executive Committee, to whom the details of the work

shall be entrusted.

R. E. DUDGEON,
M. ROTH,
D. DYGE BROWN,
H. HARRIS,
JOHN H. CLARKE,
Provisional Committee.

#### CIRCULAR.

Dear Sir,—I have the honour to forward you herewith the Prospectus of a proposed Homosopathic League.

Should you desire to become a member of the League, I shall be

happy to receive your name and subscription.

The minimum subscription has been fixed at 2s. 6d., but as the efficiency of the League will depend in some measure upon the funds at its command, members are not limited to the above amount.

When a sufficient number of names are received, it is proposed to hold a public meeting to consider the immediate steps to be taken.

If you wish for more copies of this circular for distribution amongyour friends, in order to interest them in the movement, I shall behappy to forward you any number you may desire.

I am, yours faithfully,

JOHN H. CLARKE,

Hon. Sec. of the Provisional Committee.

 St. George's Terrace, Gloucester Road, S.W., March 15, 1886.

## BRITISH HOMCEOPATHIC SOCIETY.

Ow Thursday, March 4th, at the meeting of the British Homeopathic Society (Dr Roth, Vice-President, in the chair), Dr. Blackley exhibited a case of lupus of the face in a girl. She had had the growth treated with lactic acid. The lower lip was much hypertrophied. The lactic acid left the sound tissue untouched, and dissolved out the new growth. The case is very much improved. The patient is taking arsenic and cod-liver oil; but she had taken these before. A little morphia is mixed with the lactic acid to deaden the pain, which is sharp for a time. The acid is left on for three or four hours, and then a poultice is applied to bring away the slough. The acid is applied diluted with an equal quantity of finely powdered silica as a paste. The disease was hereditary, the patient's mother being

affected in the same way. Dr. Blackley also showed a case of rodent ulcer, and a case of purpura urticans. The last patient, a girl, was cured in the hospital a year ago of the same disease.

Dr. Shakleton then read his paper on a case of Multiple

Sarcomata cured by Homeopathic Remedies.

The patient, W. A., is a strong, healthy man, thirty-eight, with no family history of the disease. Ten years ago he noticed a blackish spot under the umbilicus. It developed into a black wart, and was cauterised. It recurred, and was then pronounced a "blood wart," and was again cauterised. Then the inguinal glands began to swell, and operation was advised by a surgeon at St. Bartholomew's Hospital. Melanotic sarcoma was diagnosed, and an operation was performed. He was several months in bed. Other tumours came in various parts of the body, lips, chest, shoulders, and tongue (this being the most painful). All except one on the arm were movable. He went to St. Bartholomew's Hospital several times, and at last came to the Homeopathic Hospital. Dr. Shakleton gave at first Sulph.  $\phi$ , and later Hydrast.  $\phi$ . After several months the disease had made no progress, but no decrease was noticed. Sulph. 3 was given; after this a little improvement occurred, and then Hydrast.  $\phi$  was given again. Occasionally arsenic was given. After a month or two a short course of Sulph. 3 was again given, the progress having flagged; then Hydrast. • was given in hot water, and the tumours began to disappear rapidly, that on the tongue remaining longest. The patient has gained much weight and strength. There are a few little patches left where the tumours have been, the hair having become grey. The early history of the case was singular. The patient was so ill after vaccination as an infant that the doctor gave him up; he was full of sores; the doctors couldn't do him any good; so he was taken to an old lady in Dover, who gave beef-tea and brimstone and treacle, and he continued to attend her for many years before he got well.

Dr. Shakleton gave Hydrastis in this case because of hints he found in Dr. Hughes's books, and also in The Laws of Therapeutics by Dr. Kidd. As to Sulphur, its value in chronic cases as an intercurrent is well known. The 3rd dilution answered better than the strong tincture. The diagnosis of the case was well attested. There was the opinion of the hospital surgeon who operated; and the man had been seen before the treatment

was begun by many members of this Society.

## Discussion.

Dr. Roth congratulated Dr. Shakleton on his successful treatment of the case, and called on the Society to make any remarks.

Dr. Dudgeon thought the case a striking testimony to the

power of *Hydrastis* over tumours of this kind, though it could not be said that the drug had a homeopathic relation to them, as it had not been known to produce them. He should be inclined to think the tumours were not malignant, but that did not detract from the striking nature of the cure.

Dr. Matheson thought the question whether the disease were malignant could not be settled. He thought *Hydrastis* had a power over all glandular growths. He thought the power of

Hydrastis overrated in cancer.

Dr. Renner thought it a great pity no microscopic examination had been made. The multiple character was suspicious, and the recurrence also. He had seen the power of Hydrastis in an obscure case of tumour which could not be operated on. The patient improved immensely under Hydrastis until he lost sight of her.

Dr. CLARKE had never seen a case of malignant disease cured by Hydrastis in his own practice, though he had several times seen it arrested, and the pain relieved. He mentioned a case of a large black wart on the abdominal wall of a woman past middle life, which gradually dried up and separated under the persistent use of Sepia 3, three grains thrice a day. The surface where the wart had been was at first rough, but became

quite normal after a time.

Dr. Dyce Brown was much interested in the case. that in all cases of the kind there were sure to be doubts in some minds as to the diagnosis. Dr. Dyce Brown thought there could be little reasonable doubt that this was of a malignant nature. The glands being affected was strong evidence; the surgeon's diagnosis, the fact of the patient having been seen by members of the Society before, and the ill-health of the patient—all pointed to the same conclusion. He would expect that this multiple form would be more likely to be amenable to internal treatment than the local kind. He thought Dr. Clifton's paper on the pre-cancerous stage of cancer had thrown much light on the action of Hydrastis. This is the proper time for treatment, and the symptoms of Hydrastis show a remarkable resemblance to the symptoms of this stage. Sulphur and Hydrastis are just the remedies we should expect to do good in such a case.

Dr. Black Noble thought with Dr. Dyce Brown we should be very chary of throwing doubt on the diagnosis; the symptom most against it was the long duration. He had a case of epithelioma of the cervix uteri. Dr. Granville Bantock confirmed the diagnosis, and said the case was too bad for operation. Under Ars.-I. 3x the patient was perfectly cured. Dr. Granville Bantock now thinks he may have made a mistake in his diagnosis; Dr. Noble does not. Vaginal injections of Condy's fluid

and water were used locally, and nothing else.

Dr. BLACKLEY (who as secretary had some difficulty in providing a paper for March) thanked Dr. Shakleton for coming forward and filling the gap in such an interesting and able way. Dr. Blackley thought the diagnosis could not be well doubted, the patient having been seen here by so many members. For his part, he had not the smallest doubt of its correctness. He would feel it a duty to give Hydrastis in the next case he had. He felt with Dr. Matheson that the action of the drug in cancer was not so satisfactory as some made out; but he also agreed with Dr. Clarke that much improvement is very often effected. He thought there was much to be threshed out in this field. If (as he had often proved) Thuja would cure warts or Iodide of Arsenic epithelioma, there is no reason why all growths should not be amenable to internal treatment.

Dr. Roth (in the chair) was surprised that no remarks were made as to the supposed cause—vaccination. He asked whether a cachexia was not produced by the vaccination, which was like a seed bringing forth morbid growths in different parts.

Dr. BATAULT questioned whether there was any syphilis in

the case.

Dr. Shakleton (in reply) said that the position of the tumours precluded the possibility of the origin being in the glands. The cachexia seemed to indicate malignancy. Dr. Shakleton had had great success with *Thuja* in curing warts. He thought that for us to say that things were not curable because we could not cure them was presumption. He had thought of syphilis, but could not prove anything on this head.

# FROM ABROAD. (ABSTRACTS AND EXTRACTS.)

#### GERMANY.

## LYCOPODIUM IN DIARRHŒA.

By Dr. Elb.

Miss R. has for the last four years had every afternoon, between three and four o'clock, diarrhoa, consisting of one or two thin slightly bilious stools, preceded by very violent colic. Eructation of gas after every meal; symptoms aggravated by cold things, beer, milk, fruit and green vegetables, but the strictest dietetic precautions do not prevent the occurrence of the diarrhoa. She thinks she originally got it by drinking cold water. Lycopod. 6x, two drops three times a day. After three

days' use of this medicine she had a soft stool every morning, not preceded by pain. No afternoon stool; eructation better. She continued the medicine for a fortnight, and was perfectly cured. (Allg. H. Ztg., 24th Nov., 1885.)

## RHUS IN PEMPHIGUS.

By Dr. Elb.

A BOY, set. fourteen, had for four years suffered from an eruption that continued to spread over his body. It began with blisters of various sizes, at first filled with clear serum, which grew turbid; then the blisters burst, became covered with scabs, spread over the surface, secreting much fluid, and causing burning and itching. The whole scalp, abdomen, lower part of the chest, portions of the lower extremities and back, were covered with a moist eroding eruption; large portions of the surface were entirely covered with it. He had hitherto been under allopathic treatment, and had frequently been treated for a length of time with Arsonic and various unguents, but the eruption had continued to spread. He got Rhus Tox. 30, five globules twice a day, from the 1st July to the end of August, by which time he was quite cured and had no relapse. (Allg. H. Ztg., ibiā).

## PATHOGENESY OF COCAIN.

This fashionable remedy has frequently caused disagreeable toxic effects. When applied to the nose and throat it sometimes causes the following symptoms: Cold feeling and paleness of the whole body, vertigo, nausea and tendency to vomit, trembling, apathetic sleepy state with open eyes, anorexia, inability to walk, with feeling as if his legs did not belong to him. Bresgen made trials of it on himself and wife by introducing three or four drops within an hour into each nostril. In his wife, who used twenty drops in this way, in a short time there occurred: cold feeling, increasing to regular rigor, an intoxicated state, first cheerfulness, followed by depression, feeling of nausea in throat, staring eyes, vacant look, diminished thinking power, speech difficult, sleeplessness and restlessness all night till 4 a.m., gait unsteady, staggers without support, anorexia and disgust at food. All these symptoms lasted till the following day, especially a paralytic weakness of the limbs. (Allg. H. Ztg., 8th Dec., 1885.)

## AILANTHUS IN SCARLATINA.

In the Allg. H. Ztg. of 17th November, 1835, Dr. Elb relates the following case:—Maria R., æt. five, was attacked on the 20th June with violent fever and headache. I saw her the following day, and diagnosed scarlatina. Prescribed Aconite. The second day her state was satisfactory, and Aconste was continued. On visiting her on the 22nd June the parents told me that she was much changed, and had passed her evacuations involuntarily. I found her in deep coma, the tip of the nose, ears, hands, feet, and legs were icy cold; respiration quick and irregular; pulse 140, thready; exanthema pale violet coloured. I prescribed Ailanthus 3x, 10 drops in half a pint of water, every half-hour, and, as improvement went on, every hour, and still seldomer. The effect was striking. After the first dose the coma disappeared, and the extremities, nose, etc., became On the 24th I found full regular pulse, 120, the eruption fully out, and of normal red colour. She was quite rational, and was playing in bed and wanted food. Since yesterday afternoon she had passed urine in the vessel. Both tonsils showed diphtheric ulcers. This led me to change to Morc.-Cyan. 6, On the 25th and 26th there was no change, and the medicine was continued. On the 27th I was informed that she had lost her appetite and playfulness, was very cross, and complained of great pain in throat, especially on moving the head, and intense thirst. She was extremely hot; pulse very frequent, small; the ulcers on the tonsils much larger, gangrenous. I prescribed Ars. 3x and Merc.-Cyan. in alternation. On the 28th she was much worse. The gangrenous ulcers had extended to the velum palati and uvula; excessive feetor of breath; pulse between 160 and 180. I gave up the Ars. and Merc.-Cyan. and returned to Ailanthus as before. Some hours later, on visiting the patient, I found her considerably improved. The gangrenous places had not extended, the skin moist, thirst and apathy diminished; pulse 140, not quite regular. She asked for cocoa. I allowed milk, which she took with relish and swallowed without difficulty. This was the first nourishment she had taken for some days. That night she slept well, and the following day I found her much improved, sitting up in bed and playing with her doll. She showed her throat willingly. The gangrene was quite circumscribed, very little feetor of breath. In two more days the diphtheria was gone. The Ailanthus was continued during three days at longer intervals. On the disappearance of the ulcers there was no indication for any more medicine, and the scarlatina went on favourably without complication. Dr. Elb regrets that he interrupted the Ailanthus in consequence of the diphtheric symptoms.

# INSTITUTIONS.

## LONDON HOMOEOPATHIC HOSPITAL.

## THE BAYES WARD.

THE London Homosopathic Hospital was never at any period of its history so full as at present, and more room is urgently needed. applications for admission having to be refused almost every day. The Bayes Ward, which forms part of the extension building, is ready to be furnished and occupied as soon as the Board of Management can command the necessary funds. The Chairman of the Board, Major Vaughan Morgan, has written the following letter to every medical man in the Homosopathic Directory, and we trust that every recipient will do his best to respond to the appeal. Major Vaughan Morgan has himself set a good example by heading the subscription list with £1,000.

#### Major Vaughan Morgan's Letter.

DEAR SIR,—In my capacity of Chairman of the London Homosopathic Hospital, I am desirous of calling your special attention—as a medical man practising homosopathy—to the claims of that Institution.

The Hospital has recently been entirely re-organised, and now contains eighty beds; in addition to which the Nursing Institute has been successfully established, and properly qualified nurses, trained in the wards, can at all times be obtained for either medical, surgical, or accouchement cases. The nurses retained for the latter have not only received the training of our Hospital, but hold the certificates of Lying-in Institutions.

By the munificence of the friends of the late Dr. Bayes a new ward has been built, which it is intended to furnish and open for male patients early in 1887. This ward will contain fourteen beds, involving an increased annual expenditure of about £500.

The Bayes School Fund, available for this purpose, amounts to £1,452, and the sum subscribed after his death amounts to £1,440, making £2,892, and producing about £112 per annum.

The Board of Management intend, therefore, making a special appeal for the remaining necessary income, which they hope to receive in the form of annual subscriptions and donations.

A Bazaar and Fine Art Distribution will be held in the new ward next May, and a Concert is being organised, the assistance of several first-class artistes having been promised. Gifts of useful and fancy articles and works of art for the above will be very thankfully received from yourself and your friends.

Several contributions have already been promised by the members of the Board of Management towards this desirable object, including one thousand pounds from the writer; one hundred guineas each from the President of the Hospital, Lord Ebury; the Vice-Chairman, Henry Tate, Esq.; and Colonel J. C. Brown; thirty guineas from Allan E. Chambre, Esq.; twenty guineas each from F. Rosher, Esq., J. P. Stilwell, Esq., J. Slater, Esq., and J. Gray, Esq.; ten guineas from H. W. Prescott, Esq.; and several smaller sums, and annual subscriptions, from other members. Intimations have also been received of other forthcoming amounts, including one donation of £500 from a lady supporter.

This support volunteered before the scheme has been made public is encouraging, and the Board rely on your support, and trust that you will influence your friends to promise to contribute

in 1887.

In conclusion, I would venture to appeal to you for your energetic suport of the Hospital. It ought to be the pivot of homocopathy in the United Kingdom, and a centre of union among all the disciples of Hahnemann. The Board has always regarded its mission in that light, and should it appear to lack the requisite qualities, any suggestion you may offer with this view would be gladly received and considered.

I have the honour to be,
Yours faithfully,
(Signed) Wm. VAUGHAN MORGAN.

5, Boltons, London, S.W., March 16th, 1886.

# LIVERPOOL HOMCEOPATHIC DISPENSARIES.

OUTSIDE the metropolis there are no institutions in the kingdom devoted to homosopathy that can show such a brilliant record, both in their proper work of ministering to the sick poor, and in their other work of converting and educating homoeopathic doctors, as the Liverpool Dispensaries in Hardman Street and Roscommon Street; and we question if the good people of Liverpool will allow that they are second to any. The Forty-fourth Annual Report has just been presented, and it shows the number of attendances (indoor and outdoor) to have been at the two Dispensaries during 1885 no less than 78,881. As we intimated last month, the Dispensaries will now become amalgamated with the Hospital that is being erected by the munificence of Mr. Henry Tate; and we should think that with such a clientèle there will be no difficulty in filling the hospital wards. Nor should there be much difficulty, in spite of bad trade, in securing among the many warm friends of homocopathy in Liverpool a sufficiently large subscription list to answer all needs.

# HASTINGS AND ST. LEONARDS HOMEOPATHIC DISPENSARY.

WE have received the sixth Report of this Dispensary, and are glad to find a record of progress as regards both the amount of work done and the pecuniary support afforded by the public. The number of patients has increased from 1,158 during the previous year to 1,257 in 1885. Of the 1,257, 353 were under treatment for diseases of the eye. The number of attendances has increased from 5,048 to 5,208. There were also 105 dental cases under the dental surgeon, Mr. Philip. Dr. Croucher is honorary physician and Mr. Frank Shaw honorary surgeon to the Dispensary, and Mr. Knox Shaw takes charge of the eye cases exclusively.

## BUCHANAN COTTAGE HOSPITAL, ST. LEONARDS-ON-SEA.

THE Buchanan Cottage Hospital of St. Leonards is a model institution which every considerable watering-place would do well to copy. Nor need the privilege of possessing cottage hospitals be confined exclusively to watering-places. There are many towns in this country where homoeopathy is so well established that there should be little difficulty in obtaining and supporting a cottage hospital devoted to the practice of homeopathy. But our watering-places, which are especially concerned with the restoring of sick persons to health, should certainly show the way, as St. Leonards had done with its Cottage Hospital, and also Bournemouth with its no less useful Convalescent Home. The Buchanan Hospital has 15 beds and three private wards. The Messrs. Knox Shaw and F. H. Shaw are the medical officers, Mr. Knox Shaw having charge of the ophthalmic cases, which form a considerable portion of the whole. The number treated during the year was 127, and of these 74 were discharged cured. We are glad to see that the committee of the hospital are using the facilities it affords for training nurses. The hospital is well supported financially, but old subscribers have been removed by death, and, as is usual with all such institutions, new ones would be heartily welcomed.

# HAHNEMANN CONVALESCENT HOME AND HOMEOPATHIC DISPENSARY, BOURNEMOUTH.

THE Hahnemann Convalescent Home has completed the seventh year of its existence, and the Annual Report shows an

increase of 33 patients received on the previous year. The total number for 1885 was 93. The Homosopathic Dispensary, which is now united with the Convalescent Home in the same building, shows a decrease during the year; but this is explained by the change made from the old site. It is believed that the increased accommodation now given will soon more than make up the difference. Drs. Nankivell, Hardy, and Frost are the medical officers of both institutions.

It is time the example of Bournemouth was followed elsewhere. Bournemouth is a health resort for the cooler seasons more especially; why do not our summer seaside towns build

Hahnemann Convalescent Homes?

## TORQUAY HOMCOPATHIC DISPENSARY.

At the thirty-eighth annual meeting of the Dispensary Committee, held on February 10th, Drs. Midgley Cash and Edgelow, the medical officers of the institution, reported that they had treated at the Dispensary 819 patients during the year, the attendances numbering 5,097, and averaging 49 for each dispensary day. It will be seen from this that this comparatively venerable institution is enjoying a very vigorous old age.

# EASTBOURNE HOMEOPATHIC DISPENSARY.

At this institution the number of attendances during 1885 has been 2,515 (being 608 in excess of last year). Of the 456 patients who have been under treatment 354 are reported cured or relieved, 34 received no distinct benefit, 68 still remain under treatment. Drs. Gould and Walther are the honorary medical officers. Patients are admitted by ticket obtained from subscribers, or purchasable singly for half-a-crown.

# GLASGOW PUBLIC HOMCEOPATHIC DISPENSARY.

WE are happy to learn from the first Annual Report that the above institution has made an excellent start, and has secured



a large measure of public favour. We append the full Report of the Honorary Physicians:—

"We have great pleasure in furnishing you with some details and the results of our first half-year's labours, and we trust they may commend the institution to all who are interested in its progress. The attendance of patients has gradually and steadily increased from the first day until now, and the poor have shown their appreciation by urging their suffering friends and neighbours to embrace the benefits which the Dispensary offers. Altogether, to 23rd February, 1886, 1,110 consultations have been held, 66 visits have been paid at

patients' houses.

"To show the steady increase of applicants, we may mention that in November, 1885, 127 persons obtained advice and medicine; in December the number was 246, and in January, 1886, 258. During the week ending February 19th the number was 91—the highest number yet obtained. Some very intractable and long-standing diseases have yielded promptly to the treatment adopted, and the manifest satisfaction which the patients themselves have evinced has greatly encouraged the medical officers, and will, we believe, stimulate the committee and subscribers to still greater efforts. Three hours per week having been found far too little in which to overtake the work, Tuesday evening has been devoted to the work, in addition, and on each occasion the medical officer in attendance has often been detained over two hours before disposing of all the The amount contributed by patients has been £3 18s. 11d. to 23rd February.

"Trusting the above account may meet with the approval of the

Committee.

"We are, yours faithfully,
"Thomas Simpson, M.D., M.R.C.S. Lond.

"R. GIBSON MILLER, M.B., C.M."

## SOCIETY FOR THE PREVENTION OF BLINDNESS.

DR. ROTH, the hon. sec. of the Society for the Prevention of Blindness and the Improvement of the Physique of the Blind, has just issued his sixth Annual Report. The Society has much reason to congratulate itself upon its year's work; if it had done nothing more than publish the admirable work of Dr. Fuchs (of which the English translation by Dr. Dudgeon was reviewed in our pages some months ago), the Society's prize essay, in its original German, and also in English and French translations, it would have deserved universal gratitude. The Society records its thanks to M. Francisque Sarcey for permission to translate into English his brilliant little book "Gare à vos yeux." This has since been accomplished by Dr.

Dudgeon, and the translation is reviewed in our present issue. There is at present sitting a Royal Commission to inquire into the general condition of the blind; and we are glad to learn that the hon. sec. of this Society, Dr. Roth, has been asked to give evidence. We have no doubt he has impressed on the commissioners the great necessity there exists for more effectual instruction and examination of medical students in this branch of the medical art before admission to their degree.

# REVIEWS OF BOOKS.

## "MIND YOUR EYES!"1

"MIND your eyes!" is Dr. Dudgeon's happy and piquant rendering of M. Sarcey's "Gare à vos yeux." M. Sarcey, the author of this little work, is an eminent French littérateur, and he has told with all the felicity of a past master in the literary art the story of his lifelong sufferings from short-sightedness; and from his own bitter experience he warns his fellow-sufferers to put no trust in certain comfortable doctrines, very sweet to the soul of the short-sighted.

"My myopic" (Myopic means short-sighted; Myopia, short-sightedness; Myope, a short-sighted person) "fellow-sufferers should be thoroughly persuaded that there is no good sight except normal sight; that the sight of myopes, I mean of course decided myopes, is always a bad sight; that every one who is forced, by his sight becoming short, to stick his nose into his book should immediately, instead of rejoicing like a fool, as I did myself, saying, 'Anyway, I am sure to have strong eyes, which can only improve as I grow older;' yes, every such person should hasten to an oculist, get his advice and act on it, about the spectacles he should wear and the precautions he should take.

"And I will not conceal, from him that he will require a good

many

"There is another notion abroad which should be guarded against like fire. I myself entertained it, and I hope my case will be a warning to others.

"I had always heard, and indeed the idea is generally held, that it is better not to wear spectacles for reading and writing, because they

<sup>1</sup> Mind your Eyes! Advice to the Short-sighted. By their Fellow-Sufferer, Francisque Sarcey. Translated by R. E. Dudgeon, M.D. London (for the Society for the Prevention of Blindness): Baillière, Tindall, and Cox.

fatigue the eyes. We ought, so it is said, to force and accustom our-

selves to work without the aid of any glass.

"Well, that is pure stupidity! I assure you, I swear to you, it is stupidity; and I cannot speak of this stupidity without a feeling of anger, for I was myself a victim of it."

This is excellent; and we have no doubt that the disagreeable but wholesome truths thus forcibly put by the man of letters will do more good than all the valuable maxims that lie buried away from the public gaze in medical treatises written for the profession.

M. Sarcey tells in the most delightful way the story of how he discovered his malady. He was about eight years old when

the revelation came:—

"My father was master of a boarding school, and leading up to the court of the establishment was a very long avenue of old limetrees, which in summer by their interlacing branches formed a nice shaded walk. Here I played sometimes with my companions, sometimes alone.

"One day for fun I got hold of the large silver spectacles my father used to wear and put them on my nose, as children will do, in

plav.

"That was fifty years ago. The sensation I experienced is still vivid in my memory. I uttered a cry of astonishment and delight. Before that day I had never seen the vault of foliage which arched over my head except as a large green compact sheet, through which no ray of light penetrated. All at once I saw with surprise, stupe-faction, and rapture that there were openings in this dome through which the light penetrated; that it was composed of separate leaves, not soldered to one another; that the sun's rays filtered through and played among them, illuminating some and leaving others of a darker shade of green. What astonished me most, and caused an enchantment which I cannot even now speak of without emotion, was that through some holes in the foliage I suddenly perceived far away little bits of the blue sky. I clapped my hands; I was in eostasy."

But we will not quote any more of this delightful little book; for delightful it is, though the subject is painful enough. All persons, whether long-sighted or short, need to know how to take care of their eyes, and the story of M. Sarcey, and the teachings of his experience, will convey the information in the most pleasant of ways. The story of his experiences during an operation for cataract, and of what took place before and after, is as entrancing as any novel. The Society for the Prevention of Blindness, under whose auspices the book is issued, have done a service to the English-speaking world by publishing this translation. Of Dr. Dudgeon's fame as a translator we have no need to speak. To translate a work of this kind, full as it is of idiomatic French, presents many more difficulties than the translation of a dry scientific treatise; and Dr. Dudgeon has

proved fully equal to his task. We have not had the opportunity of comparing the translation with the original, but we can answer for it that the former possesses a piquancy and lightness of touch that are characteristic of M. Sarcey's style; and whilst the pleasant French flavour of the work is in no way impaired, the translation will be found expressed in thoroughly idiomatic English. We advise all our readers to purchase at once "Mind your eyes!"

## DOGS IN HEALTH AND DISEASE.1

This excellent little manual will be welcome to all possessors of dogs, and especially welcome to those who at the same time happen to be believers in homoeopathy. Mr. Hurndall finds homoeopathy of the greatest service in his practice among animals, and we can attest the soundness of his recommendations as to the use of the different medicines in the diseases he describes. Mr. Hurndall, residing in Liverpool, has naturally much to do with the greyhound, and he takes this beautiful but delicate animal as his type in describing the best management for dogs in health, and their treatment in disease. Mr. Hurndall is, as we should expect, an enthusiastic admirer of the "noble sport" of coursing. For our part, we are more inclined to look at it from the point of view of the hare. But though the greyhound is his text, his sermon applies to hounds of all kinds, and all kinds of hounds will be the better if their owners possess themselves of Mr. Hurndall's work. He will do well to extend it a little in future editions. We do not find any allusion to that troublesome disease "the mange." Perhaps the lordly greyhound is never troubled with any so plebeian a complaint?

#### PROGRESS OF DENTISTRY.

This little work contains much useful and very necessary information regarding the preservation of the teeth, and gives an account of what we believe is an invention of the author's, a plan for cementing artificial crowns of porcelain on sound stumps. The author particularly insists on the necessity of taking the greatest care of the first teeth. His suggestions as to diet are very good. Oatmeal, whole wheat meal, and milk are to be the staple food of children. Nothing but milk should be given for the first nine months. Farinaceous foods, arrowroot, cornflour, and other messes are actually hurtful under six

<sup>&</sup>lt;sup>1</sup> Dogs in Health and Disease, as Typified by the Greyhound. By John Sutcliffe Hurndall, M.R.C.V.S. London: E. Gould and Son. 1886.

<sup>2</sup> Progress of Dentistry and Oral Surgery. By J. J. Wedgwood, M.D., D.D.S., L.D.S. Fifth edition. London: Henry Kempton. 1886.

months of age. After one year, brown bread and butter, the yelk of eggs, rice, catmeal, baked potatoes, chicken or mutton broth, ripe fruit, and a plentiful supply of milk.

# GENERAL CORRESPONDENCE.

## THE NAME OF THE LEAGUE.

To the Editor of the Homeopathic World.

SIR,—With reference to the "New Propaganda," I think it essential that the name Homeopathy or Homeopathic should appear in connection with the title. The great mass of the community will not understand the drift of the title, "Medical Reform League," and the homeopathists will not be pleased unless the name appears—and justly so, I think. I shall put down two or three suggestions as to name. Then as to subscription, make it low, say 5s. per annum. Suggestions:—"Medical Reform League, in connection with Homeopathy;" "League for Medical Reform, in connection with Homeopathy" (I like the latter best); or "League for Medical Reform, including Hahnemann's Discovery." With best wishes for the success of the enterprise, and regretting it had not been made thirty years ago,

I am, Sir, yours faithfully,
JOHN MOORE.

51, Canning Street, Liverpool, March 12th, 1886.

## LITERATURE WANTED.

To the Editor of the Homocopathic World.

Sir.—It seems to me, that although we have many pamphlets upon "What is Homeeopathy?" we have none upon "What is Allopathy?" and yet how is it possible to show to others a more excellent way, if what we are trying to supplant is not thoroughly exposed? Now, we want a book that shall effectually deal with this question in its entirety, showing up its ever shifting theories, and its ludicrous non-sequitur practice; its utter helplessness when any new phase of disease crops up, and its certain and hopeless collapse, could it be only deprived of opium and its alkaloids, the only drug to which it owes its raison d'être; its miserable ethics, by which it is now conceded by some of its leaders that the patients' interests are sacrificed (or, as I suppose it may be put in plain English, that the patient may die, sooner than the ethics should be set aside). It should deal with its numerous schools, or more properly, factions, their love for each other, the way they influence their practice; their deter-

mined perversity in seeking in every direction for help but the right one, and in selecting the most outlandish and therefore unlikely remedies, instead of looking at home; their careless and cursory examination of the patient, and the terrible mortality that is the result of their doings.

But the work wants doing thoroughly, by a competent, and moreover by no gentle hand. It requires aledge-hammer treatment that will so demolish it that it cannot be resuscitated. have often thought that the most readable work would be one on the Jules Verne principle, in which all the data, having been first collected and arranged, is then worked out into a most enjoyable and instructive narrative.

But this I leave: if these ideas are worth anything, there should be some amongst us, I hope, who have the ability and leisure to do the work.

Yours very obediently.

## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Alian (J. W.). Outlines of Infectious Diseases. For the Use of Clinical Stu-dents. (Churchill. 3s.)

Allinson (T. B.) A System of Hygienic Medicine; or, The Only Way of Treating Disease. (f. Pitman. 1s.)

Bradshaw (B.). Dictionary of Mineral Waters, Climatic Health Resorts, Sea Baths, and Hydropathic Establish ments. New edition. (Trubner. 2s. 6d.)

Cantile (J.). A Text-Book of Naked-Eye Anatomy, being an accompanying Text to Masse's Plates. 3rd edition. With 113 Plates. (Baillière. 50s.)

Clarke (J. H.). The Prescriber: A Dictionary of the New Therapeutics. (Keene and Ashwell. 8s. 6d.)

Duncan (J. M.). Clinical Lectures on Diseases of Women. 3rd edition, much Enlarged, with Appendices. (Churchill. 16a.)

Farquharson (R.). A Guide to Therapeutics. 4th edition. (Smith and Rider. 7s. 6d.)

Galabin (A. L.). A Manual of Midwifery. With 227 Engravings. (Churchill. 15a.)

Gant (F. J.). The Science and Practice of Surgery. With one thousand and ninety Illustrations. (3rd edition. 2 vols. (Baillière. 36s.)

Gerrard (A. W.). Elements of Materia Medica and Pharmacy. (Lewis, 8s. 6d.) Laudis (H. G.). The Management of Labour, and of the Lying-Inn Period: a Guide for the Young Practitioner. (Griffin. 7s. 6d.) Niblett (S. B.). A Practical Treatise on Epilepsy: its Successful Treatment and Cure. New and revised edition. (Author. 1s. 6d.) Prescriber's Pharmacopoela. Containing all the Medicines in the British Phar-Gerrard (A. W.). Elements of Materia

Prescriber's Pharmacopoela. Containing all the Medicines in the British Pharmacopoela arranged in Classes. Revised and edited by Nestor Tirard. 6th ed. (Churchill. 3s.)
Reynolds (J. J.). Notes on Midwifery. Specially designed to Assist the Student in preparing for Examination. 2nd ed., revised and enlarged. (Churchill. 4s.)
Ross (J.). Handbook of the Diseases of the Nervous System. Illustrated. (Philadelphia. 22s. 6d.)

delphia. 22s. 6d.) Thompson (Sir H.). On the Suprapuble Operation of Opening the Bladder for the Stone and for Tumours. (Churchill.

3s. 6d.)

Wilson (A.). Common Accidents, and How to Treat them. Numerous Illus-trations. (Chatto. 1s. 6d.)

Year-Book of Treatment for 1885: a Critical Review for Practitioners of Medicine and Surgery. (Cassell. 5s.)

# SHORT NOTES, ANSWERS TO CORRESPONDENTS, ETC.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the

Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester Road, South Kensington, S.W. All advertisements and busi-

ness communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

WE are requested to give notice that Dr. Harmar Smith has left Ramsgate and removed to Great Malvern. He is succeeded in practice by Dr. E. J. Hawkes, of 4, West Cliff Road, Ramsgate.

DR. HEMPSON DENHAM has left Southsea and removed to London. His present address is 12, Batoum Gardens, West Kensington Park, W.

#### CORRESPONDENTS.

Communications received from Dr. Knox Shaw, St. Leonards; Dr. Cash, Torquay; Dr. Roth, London; Dr. Dudgeon, London; Dr. Clifton, Northampton; The Rev. R. Swallow, Market Rasen; Dr. Thomas Simpson, Glasgow; Mr. C. Woolcott, Leamington; Dr. Proell, Nice; Dr. Winterburn, New York; Mr. Frank Shaw, St. Leonards; Dr. Moore, Liverpool; Mr. Allan Wilson, Lewisham Hill; Dr. Harmar Smith, Ramsgate; Dr. E. J. Hawkes, Ramsgate; Dr. Yeldham, London.

# BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische Zeitung.—Zoophilist. — Medi-Advance.—Monthly Homœopathic Review. — Revue Homocopathique Belge.—Homöopatische Monatsblätter.-New York Medical Times.— American Homoopathist.-St. Louis Periscope.—United States Medical Investigator.— Medical Advocate.—Clinique. Medical Visitor.—Chemist and Druggist.—The Homcopathic Journal of Obstetrics.—La Reforma Medica.—The Guide. -Revista Hom. Catalana.— Hahnemannian Monthly. Bibliothèque Homosopathique.—Medical Era.—Boericke  $\mathbf{and}$ Tafel's Bulletin.—Medical Annals. — California Homosopath. — The Clinical Review.—Homeopathic Physician.-North American Journal of Homoeopathy.-Liverpool Daily Post. — Homeopathic Recorder. — Medical Counsellor.—The Daily Inter-Recorder. — Medical Ocean. — Medical Current.— The Stockholder. — Revista Argentine. — Supplement the Boston Journal (U.S.A.), Feb. 27.—Transactions of Homœopathic Medical Society of Pennsylvania.—Report Torquay Homeopathic Dispensary.—Report of Society for Prevention of Blindness. Leçons de Clinique Médicale. By Dr. Jousset.—Archives of Pediatrics.—Chironian. — Report of Bradford Homeopathic Dispensary.—Empyema, H. C. Clapp. - Daily News, March 19.

## THE

# HOMŒOPATHIC WORLD.

# MAY 1, 1886.

# THE 131st ANNIVERSARY OF HAHNEMANN'S BIRTH.

On the 10th of April, 1755, SAMUEL HAHNEMANN, the Reformer of the Practice of Medicine, first saw the light. It is a date to be remembered; and the British Homeopathic Society has done well to revive an old custom of celebrating the anniversary by a dinner. On Saturday, April 10th, 1886, members of the Society and their guests, to the number of about sixty, sat down to dinner at the Holborn Restaurant, drawn together in the bonds of good-fellowship by a common desire to do homage to their great benefactor.

In many respects the dinner must be pronounced a success. There was a goodly gathering of those who have few opportunities of meeting; and not a few who had long been acquainted by letter had there the pleasure of seeing each other As a social reunion nothing could have been face to face. more pleasant, and great credit is due to Dr. GALLEY BLACKLEY, who originated the idea of reviving the good old custom, and to Dr. Tuckey, who shared with Dr. BLACKLEY the work of making the arrangements. when everything has been said for the undoubted success of the reunion, it must be allowed that the limitations of the functions of the British Homeopathic Society were made very apparent: for it is very plain that the British Homeopathic Society cannot be regarded as the sole or even the chief custodian of the reputation of HAHNEMANN in this country.

As our correspondent, Dr. Dudgeon, clearly shows, the Society has performed admirable work in its day, and is doing admirable work still; but it has never been claimed for the Society—unimpeachably respectable and professionally correct as it has ever been—that it has once touched either the great patient-world or the world of Old Physic. As a Medical Society for mutual improvement and edification, it has done excellent work; and each of these characteristics was done ample justice to at the dinner; but as the upholder of the fame of Hahnemann to the world at large, and the defender of his work, it must be confessed that the Society has played but a very minor part.

No; the British Homeopathic Society has work of its own to do, but the maintenance and defence of the fame of HAHNEMANN must pass into other hands. Let the British Homeopathic Society celebrate the anniversary of HAHNE-MANN's birth by all means; but there is a larger Society which has an interest in homocopathy just as keen-the Society which includes our patients and the generous supporters of our hospitals and dispensaries, the Society which includes the chemists who prepare our medicines. and to whose conscientious care homocopathy and its practitioners owe so much. If HAHNEMANN'S birthday is to receive any adequate celebration, the homeopathic chemists and the homeopathic public must take in it their rightful parts. At the dinner on the 10th of April there were present members of the laity no doubt, but they came as visitors or guests. There was not, so far as we could discover, a single chemist present. This is not right; and it must not be. The British Homeopathic Society is very well, but it is not enough. Another Society is wanted which shall embrace all sorts and conditions of HAHNEMANN's disciples in one solid body; a Society which is prepared to sink all the punctilios of prejudice when Truth and Justice are at stake;—this is the kind of Society that is wanted if HAHNEMANN's fair fame is to spread and grow in our land; and this is the kind of Society which an endeavour has been made to found by the promoters of THE HOMOGOPATHIC LEAGUE. It is now 131 years since HAHNEMANN was born; and nearly a century—ninety years—since he enunciated the law of similars in HUFELAND'S Journal; and what have we to show? The dinner of the 10th of April will answer that question. The 132nd anniversary of HAHNEMANN'S birth, if we are permitted to see it, shall have a celebration of a more representative kind.

# NOTES.

## THE LEAGUE.

The amount of interest excited by the new movement is very encouraging. Every day brings in the names of new supporters, and many gentlemen have undertaken to act as local secretaries in different parts of the country. We publish letters in this issue both for and against, but it will be seen that the arguments against are not of a formidable kind. The report of the meeting held at Bath in 1884 will be read with much interest at this time.

# THE INTERNATIONAL CONGRESS.

Our American friends are already making arrangements for their visit to Brussels in August. We are not aware that any one has undertaken to make arrangements for the British party; but if all those who intend to go, and who have not made their arrangements, will send in their names to us, we shall be happy to obtain all necessary information and publish it in our pages.

# A SCARLET FEVER CONVALESCENT HOME.

ALL medical men know the value of change of air for scarlet fever convalescents; and most medical men know the difficulty of finding any place that will receive convalescents from scarlet fever. Miss Mary Wardell, 55, Stanley Gardens, Belsize, N.W., has sent us a notice of the MARY WARDELL CONVALESCENT HOME, which is devoted to the reception of patients of this kind. Separate provision is made for those who can afford to have separate apartments,

and the terms for these patients are three guineas a week, for others 15s. a week (children 10s.) Miss Wardell will be happy to give information to those who desire it.

## M. PASTEUR.

THE sixth death from hydrophobia has taken place among M. Pasteur's "patients." When all those of the latter who were bitten by dogs not rabid, and those who were not bitten at all, but only licked or looked at, are left out of calculation, the death-rate of the remainder will not differ appreciably from the ordinary death-rate after bites by rabid animals.

## THE BUISSON TREATMENT.

Whilst the failure of the Pasteur experiment is becoming daily more manifest, the sweating treatment of hydrophobia, both preventive and curative, introduced by Dr. Buisson, is steadily gaining in favour. The details of a case of cure have reached us from New Jersey. The patient was a boy of ten; and the facts are vouched for by the Rev. J. J. Curran and Dr. Exton. As in a case narrated by Dr. Dujardin Beaumetz, Jaborandi was given to the patient as well as the vapour bath. Ample provision has been made in London for the reception of hydrophobic patients, for the particulars of which we refer our readers to our advertising pages. Mr. Metcalfe, under whose care J. W. Mitchell, one of the persons bitten by the Bradford mad dog, was placed, has promised to give us a full account of the case for our next issue.

# A NEW DIRECTORY.

WE are glad to see that an enterprising firm of publishers and chemists have undertaken to bring out a new directory of homeopathic practitioners that shall include those practising in the British Colonies and on the Continent as well as those in Great Britain. This will be an enormous advantage to homeopathists all the world over, and to the cause of homeopathy as well. We often wish to reach practitioners of our own faith who reside abroad, but are unable to do so for want of a directory. In the present period of revival such a work is almost a necessity. Messrs. Keene and Ashwell, as we understand, intend to make their

directory fuller than the useful and indispensable little directory published by Thompson and Capper of Liverpool. The new directory will be more like Churchill's, giving biographical details, such as appointments held and works published. We hope that every assistance will be given to Messrs. Keene and Ashwell in carrying out this enterprise.

## A MUCH-HONOURED COLLEAGUE.

A Society for the Prevention of Blindness in Italy has been lately established in Florence; and they have resolved in the last meeting to honour Dr. Roth by placing him the first on the list of those of their members who have done the most service to the cause of prevention of blindness. This resolution was officially communicated to Dr. Roth.

Dr. Roth has received the diploma of honour from the President and Council of the World's Exposition held in 1884 and 1885 at New Orleans, U.S. America, where Dr. Roth's collection for the Instruction of Teachers in Scientific Physical Education was exhibited. This collection was sent to America at the expense of the American Government.

At the Health Exhibition of 1884 Dr. Roth received, besides the gold medal for his collection for the Instruction of Teachers in Scientific Physical Education, a second medal in bronze; but it was only a short time ago that he received the official certificate that this medal was awarded for a model of a baby's dress. This dress has the advantage that the babies are not turned round four or five times, as is the case at present, but the baby's clothes, which are all opened in front, are placed one over the other, the baby is laid on his back, and while in this position his clothes are fastened in front.

# THE Chemist and Druggist.

Our enterprising contemporary has recently transformed itself from a monthly into a weekly journal. Judging from the first numbers of the new series, the multiplication of the issue does not impart any attenuation of interest, but the reverse. The proprietors of this journal have also undertaken to bring out a separate Australasian edition, having sent out to the Antipodes all the necessary plant. The latest information on all questions relating to drugs and chemicals

is to be found in the Chemist and Druggist, as well as the particulars of the drug market.

## HOMOSOPATHY AT NICE.

In our last issue we committed a very grave blunder in stating that the death of Dr. Guerrier and the removal of Dr. Proell to Meran would leave Nice without any representative practitioner of our school. There are still at Nice several practitioners of homocopathy. There is Dr. Meyhoffer, well known for his excellent work on the respiratory organs; Dr. D'Espiney, whose name is also well known to the readers of medical literature; Dr. Arnulphy, père, and his two sons, Drs. Bernhard and Victor Arnulphy, and Dr. J. G. Middle-It was quite inexcusable in us to forget these gentlemen and their place of abode; but the possibility of our doing so, even for a time, serves to emphasise the need there is for a complete Continental directory. We hope our foreign confrères will at once communicate with Messrs. Keene and Ashwell, 74, New Bond Street, London, W. If they will do this it will greatly help them in producing this much needed work.

# Major Vaughan Morgan's Letter.

It was not very pleasant to hear Major Vaughan Morgan say at the Hahnemann Anniversary Dinner that he could count on his fingers the replies he had received to the letter he addressed to the homeopathic medical men. Perhaps it has not occurred to them that it is one which calls for reply except in action. We trust that this is the case; at the same time it would help on the work of the Hospital authorities if each recipient of the letter would sit down at once and write to Major Morgan just what he intends to do.

# TEMPERANCE FOR ATHLETES.

THE following is from the Medical Press and Circular of April 7:—

"Mr. Weston, whose great walk of 5,000 miles, at the rate of fifty miles daily, excited interest a couple of years ago, has just won another victory for temperance. His opponent was O'Leary, a younger man. The contest took place in the United States; the conditions being that each should walk twelve hours daily, the first to cover 2,500 miles to be the winner of a puree of 3,000 dollars. Weston walked fifty-four days, averaging 46 15-54 miles daily, and was in

excellent condition at the termination of his brilliant performance. O'Leary collapsed after finishing 2,290 miles, and did not reappear on the track. Mr. Weston has been a total abstainer for some years, and his opponent is in the habit of regularly drinking intoxicating beverages."

# ORIGINAL COMMUNICATIONS.

## THE CURE OF EPULIS.

By PRECY WILDE, M.D.

This is a surgical affection concerning which the medical profession hold very decided views in respect to treatment.

Bryant, in his Practice of Surgery, writes as follows:—
"The removal of the disease, of the teeth or stumps that are involved in it, and of the bones with which it is connected, is the only sound practice to adopt. . . . . When the bone is not removed a return of the disease is almost certain." I must confess to having held this view until two years ago. Not being persuaded of the power of medicine in curing this disease, I did not see the advantage of commencing a long course of treatment in a case in which a not very severe operation would give immediate and most likely permanent relief. I held this view more especially in cases in which the size of the tumour caused inconvenience and difficulty in mastication.

I was consulted some time ago by a young married lady who had a large Epulis of the lower jaw, which was rapidly increasing in size, and ulceration of the surface made it very painful, and filled the mouth with an ill-smelling secretion, so that the appetite was much impaired, and the use of solid food almost entirely prevented. I wanted to give this patient relief as promptly as possible, and I therefore advised the removal of the tumour. In consultation with a local surgeon this course was approved and carried out. We removed every portion of the tumour, and afterwards the subjacent bone. There was no doubt of the thoroughness of the operation, but my surgical friend considered that, owing to the general hypertrophy of the gum on either side of the site of the tumour, it was probable that we should have a recurrence; we did not feel justified in carrying out the extensive operation which would have been required to have removed the teeth and alveolus over the whole portion of the gum which was hypertrophied. If the tumour recurred it would then be necessary to adopt the more severe procedure, which practically meant the removal of the teeth and alveolus of about one-half of one side of the jaw.

My friend's prognosis proved correct. The patient went away for a change, and when she returned to see me after an interval of three weeks, the tumour was almost as large as before, occupying the site of the previous operation. The growth had been most rapid and was increasing daily.

I now determined to try the effect of internal remedies and prescribed Thuja lx. The result was almost magical. The growth stopped from the day it was first taken, the ulceration of the surface ceased, and it became painless. In three weeks the gum had returned to its healthy state. Two years have now elapsed, and the patient's gums remain

entirely healthy.

This case strongly impressed me with the value of Thuja in a disease which is generally held to be beyond the range of medical relief. I do not gather from it that in a case of Epulis the physician has done his duty to his patient when he has prescribed Thuja. We have in Epulis some cause of irritation, generally the decayed stump of a molar tooth. This produces a hypertrophy of the gum tissue in general, or one of its elements more particularly. The character of this hypertrophy, or new formation, is its power to reproduce itself, even after the removal of the original cause of its production—that is to say, that if the decayed stump, the periosteum, and the surrounding alveolus be completely removed, and only a minute portion of the tumour be left behind, it will suffice to ensure the reproduction of the growth.

In Thuja we appear to have a remedy which will destroy this power of reproduction and cause absorption of the new tissue. But I should not of necessity expect Thuja to cure Epulis until the original source of irritation had been got rid of. It may do so, but the case must not be taken as a proof of it. It is possible that other remedies, such as Mercurius, will be sufficient to remove the original cause of the tumour; but in the event of such treatment failing, and that Thuja did not produce a decided effect upon the growth, I should then advise the removal of the decayed stump or other source of irritation, with as little interference as possible with the tumour, and then trust to Thuja to remove the growth. Judging from my own experience, Epulis does not appear to be a very common affection. I do not know of any

recorded cases in our literature. Hughes, in his Pharmacodynamics and Therapeutics, does not appear to mention it, neither do Marcy and Hunt, nor Bæhr in his Science of Therapeutics.

In Hoyne's Clinical Therapeutics I find Calc.-Carb., Graphites, Hepar, Thuja, and Sepia recommended, but no case recorded. The provings of Thuja point so strongly to inflammatory conditions of the molar teeth, that it seems to me probable that it may cure the original irritation as well as the resulting disease. This is a point which has yet to be determined.

Bath, April 10th, 1886.

PHYSIOLOGICAL AND PATHOLOGICAL HYPER-TROPHY OF THE HEART DURING CERTAIN EPOCHS OF LIFE.

By E. M. HALE, M.D., Chicago, Ill.

I AM aware that I am venturing upon a subject but little treated of by writers on disorders of the heart, and only casually alluded to by physiologists.

But it is a subject of much importance, especially in a diagnostic view, for the mistake is often made of confounding pathological with purely physiological hypertrophy of the heart.

There are, during the course of a perfectly normal human and probably animal existence, three grand epochs, namely: Puberty, pregnancy, and climacteric. The two latter belove. of course, to women. It is during the period when the subject is passing through these epochs, that there occurs a physiological excitement of the heart, which tends to more or less actual enlargement of the heart.

This enlargement, after reaching its acme—i.e., when puberty has been established, when pregnancy has ended, or the climacteric has passed, generally undergoes a retrograde

metamorphosis to a certain degree.

The heart, enlarged by the stimuli of these epochs, does not altogether return to its previous size, but it does partially do so.

Let us examine each epoch separately:—

I. When the girl or boy, at the age of twelve or fourteen, begins to enter the preparatory changes of puberty, certain

<sup>1</sup> From the Hahnemannian Monthly, November, 1885.



vascular channels, hitherto undeveloped, begin to enlarge. These changes are not confined to the generative organs, but consist in a general enlargement of all the tissues. The limbs and whole body become rounded, and there is a general extension of the whole vascular system. In the boy, the bloodvessels of the testes and their appendages undergo notable enlargement. In the girl, the ovaries, uterus, labia, and mammæ become very much enlarged. These newly-developed arteries and veins are yielding and lax, and the blood thrown by the heart easily finds its way into them.

Now it is a law of physiological mechanics, that the excitement of the heart increases with the diminution of resistance.

This is exemplified in a beautiful manner when a person inhales Amyl Nitrite or takes a dose of Glonoine. These agents increase the calibre of the peripheral arteries, and as soon as this is done, the heretofore quiet heart bounds into unnatural activity. It beats rapidly, it palpitates, and quickly suffuses the whole body with an unusual supply of arterial blood.

A similar action occurs during puberty, pregnancy, and

the climacteric change.

At puberty this change is very noticeable in the suffused brain, with increased emotional and intellectual activity, the sparkling eyes, the red cheeks, and the generally rosy hue of the whole surface of the body.

The action of the heart, rarely noticed before, now forces itself on the consciousness of the individual. Slight exercises cause hard beating and palpitation, and this unusual excitement arouses fear of cardiac disease in the mind of the

person, and even of parents and physician.

I have recorded in my case-book a great many instances where I was consulted by parents, whose fears were aroused by the complaints of girls and boys. On examination of such cases by auscultation and percussion, I have always found a greater force and frequency in the cardiac pulsations, but no abnormal sounds, and no abnormal area of cardiac dulness. Of course I allude to perfectly healthy persons, for there are undoubtedly instances wherein a rheumatic lesion, hitherto dormant, has been aroused and amplified by this very excitement incident to puberty. Or if there be an anæmia or chlorosis, coincident with the change, then the physiological activity overreaches normal bounds, and often rapidly develops dilatation.

I cannot give any definite statement as to the amount of

hypertrophy which occurs during the two or three years of puberty. Much depends on the habits of life of the individual. If active and laborious, the symptoms are much more severe than in those who lead a quiet and sedentary life. In fact, hard, violent labour often changes a physiological into a pathological hypertrophy, or dilatation.

Incidentally, I will observe that during this period of cardiac excitement, a condition simulating exophthalmic goitre sometimes occurs. The thyroid gland undergoes noticeable enlargement, the eyes are slightly protruding, and the heart is intensely excited. This condition is greatly exacerbated just before the menstrual period, or at the time when the menses should, but do not actually appear.

Treatment is mainly hygienic. The patient should be ordered to live a quieter physical and mental life. Emotions should be avoided. Dancing and running or climbing should be prohibited. Tea or coffee, eggs, oysters, and beef prohibited.

hibited.

Only rarely are medicines called for. Of these, coca, coffea, aconite, cactus, convallaria, lilium, and belladonna are oftenest required.

If the patient is anæmic, calcarea, pulsatilla, ferrum iod., or ferrum phos., and a more nutritious diet, with fresh

country air, are indicated.

In uncomplicated chlorosis, strychnia, and the hypophosphites; or ignatia, digitalis, and galvanism are the remedies.

II. Pregnancy.—Enlargement of the heart is a physiological process during the pregnant state. This is caused by the increased blood supply to the enlarged uterus, to supply the demands of its growth, and also to the growing fœtus. This requires either greater frequency of the contractions of the heart, or that the entire quantity of blood entering the ventricles during the diastole should be increased. the frequency of the pulsations of the heart remain unchanged, even in change of posture, therefore a dilatation of the cavities becomes a necessity, and it equally follows that this dilatation results in a thickening of their walls. This thickening is estimated to be more than one-fifth. "The interposition of the enlarged and multiplied vascular channels in the pelvic organs increases the labour thrown upon the heart, in response to which an eccentric hypertrophy of the left ventricle takes place" (Lusk).

"After delivery, the weight of the heart returns to nearly

the normal standard" (Flint).

In a large obstetric practice of many years, during a large proportion of which I have devoted myself to a study of disorders of the heart, I have had ample opportunities of

verifying the above statements.

If there has been no previous rheumatic history, with lesion of the valves, no anæmia to injure the integrity of its muscular tissues, and no marked neurotic tendency, this hypertrophy does not go beyond a physiological state. Neither the patient nor the physician need be anxious about the condition of the heart. In fact, this increase of power and size is the best thing that could happen, for it increases the health and endurance of the woman, and secures ample nutrition to the fœtus in utero.

Treatment. — During the prevalence of the practice of blood-letting, the fulness and hardness of the pulse, especially in plethoric women, was considered an indication for bleeding. But this practice has fallen into disuse, since the real condition has been demonstrated. If excessive plethora does obtain, the amount of beef, coffee, and highly nitrogenous foods should be cut down. A few doses of aconite, belladonna, or verat.-viride may occasionally be needed, but generally all agents which have a tendency to decrease the power of the heart should be avoided.

If a previous valvular lesion existed, a dilatation without thickening may occur. But by an avoidance of undue exercise, with a careful diet, and the timely and judicious use of digitalis, convallaria, nux vomica, ignatia, or ferrum, this

pathological condition can be prevented.

An anæmic pregnant woman should be carefully watched; the physician who neglects this is culpable in the extreme.

On the first appearance of weakness and pallor, the patient should be put upon a highly nitrogenous diet. She should spend a large portion of the time in the open, pure air, on high grounds, or near the sea, and be given some preparation of iron, together with strychnia, for of all medicines these possess the greatest remedial power over a weak and dilated heart. In malarious districts I have sometimes been obliged to give small doses of quinine with the iron and strychnia.

III. The Climacteric.—This third epoch in life is equally

important with the former.

It is a fact, though not generally recognised, that the man as well as the woman has his climacteric.

In woman it generally occurs between the ages of forty and fifty. In man between fifty and sixty. I do not wish

to be understood that the symptoms are as intense in man as in woman, but they do occur, as I have verified many times

in my experience and observation.

Similar periods of mental depression, similar "flushings," similar attacks of "nervous heat," a similar tendency to adiposis, and many other symptoms occur, which remind us of the climacteric in the other sex. It is at this period of life, too, that men complain of an unpleasant sensation in the heart. Old and slight cardiac lesions become aggravated, and if anemia or exhaustion of the vital forces sets in, the heart is more apt to suffer.

Change of life in woman does not, as a rule, especially in the higher walks of life, occur normally. There are usually

many unpleasant symptoms.

Dr. Tilt, in his exhaustive work on Change of Life, gives a graphic description of the abnormal symptoms. I am surprised, however, that he should assert that "the climacteric causes no changes in the heart." My experience is just the contrary. I am sorry to disagree with one of such high position, but it is a well-known fact that uterine specialists are apt to overlook disorders of distant organs, when their investigations are confined to those of generation. A woman may pass the climacteric without abnormal symptoms if she has previously had no uterine or ovarian disease, and if her general health has been good. Even in such cases, I have observed that women mention (not complain) that the heart beats harder, and that the head and chest feel oppressed at An examination of the heart, in such cases, shows a strong action, and an increased blood-pressure. If the woman has "flushings," as is generally the case, even in normal climacterics, the heart will show this change in power more distinctly. I believe that in normal climacterics, the size and weight of the heart are slightly increased.

In abnormal climacterics, this tendency to hypertrophy is

greatly increased.

I have observed that in full-blooded women, if the menses cease suddenly, and do not appear for several months, or at all, the heart then *labours* with the increased supply of blood thrown back upon or accumulated in the system. During the time the menses are absent, the heart appears to me to develop a true hypertrophy in proportion to the length of time between the menses. If, after several months, the menses return, the heart undergoes *involution*, and becomes nearly normal.



If my colleagues will make careful observations on such

patients, I believe they will verify my experience.

In thin, but strong and muscular women, such change does not so often occur; but I have observed that often such thin subjects are inclined to grow stout, and become plethoric, the blood formerly lost to the system now going to build it up.

The phenomenon of "flushing" at the change of life is not altogether abnormal. I think it often subserves a good purpose, when the heart is overloaded and oppressed by the

unusual blood supply.

"Flushings" resemble the action of Amyl Nitrite. In both the peripheral capillaries of the body are relaxed, allowing the central circulatory system to empty itself into them. As Amyl relieves a congested heart, or an attack of angina (now known to be due to spasm of the coronary arteries), so do "flushings" at any period of life. Dr. Sidney Ringer, with his close insight into the action of drugs, recommends Amyl Nitrite in very minute doses, as a palliative in these climacteric flushings. He knows that such an application is homeopathic, but he has not the manliness to admit it. I have often used it to imitate nature's processes, in cases when the heart seemed "cramped" and oppressed, with pale face and cold extremities, which condition often occurs at the change of life, when "flushings" are absent.

But to return to my subject. I think I have observed a pathological hypertrophy of the heart to occur at the change of life in lymphatic women, with lax muscular fibre. The increased work thrown upon the heart acts just the same as it does in pregnancy. The cavities are enlarged, and the walls thickened. The heart is then in a critical condition, for if the muscles of the heart are not firm, they may soon stretch under the continued pressure, and then dilatation will obtain.

As the repeated use of Nitrite of Amyl or Glonoine will weaken the heart, so will long-continued and often-repeated "flushings."

The "abdominal pulsations," so annoying in some women at the change of life, are due to a paresis of the vaso-motor nerves which preside over the abdominal aorta; the same sometimes occurs in the ascending aorta. To a certain extent, this condition may relieve an overworked heart, but if too long continued may result in a weakening of the cardiac muscles. But woe to the woman who enters the

climacteric with a heart in which there has been any valvular lesion. She is sure to suffer from it, and get a dilated heart, unless there is sufficient tonicity in her nervous and muscular system to allow compensation to obtain. I have watched such cases with great interest, for I always fear bad results. In some, a compensatory thickening of the walls of the left ventricle will occur rapidly, and prevent serious mischief; in others, dilatation will rapidly set in, with all the sad results of dropsy, pulmonary edema, and cardiac paralysis.

If violent and repeated hæmorrhages occur, the chances of cardiac compensation are almost nil. Dilatation will occur, unless the patient is treated with great judgment. It is criminal to allow uterine hæmorrhages to occur at the change of life. They can be, and should be, promptly arrested. They are always abnormal, and always injure the integrity of the heart and break down the general system. Their suppression never causes any but the most temporary discomfort.

Treatment.—The principal remedies for the unpleasant or abnormal symptoms of the change of life, are Amyl Nitrite, Glonoine, Aurum, Lachesis, Lilium, Sepia, Pulsatilla, and Sanguinaria.

Nearly all the symptoms can be palliated or removed by

their judicious administration.

Only in cases of great plethora, with violent congestions, may aconite or verat.-viride be called for. But when they are indicated, they should be given boldly, until relief is obtained.

If the physiological hypertrophy of the heart threatens to go beyond normal bounds, the diet and exercise should be changed to meet the condition. On the other hand, if dilatation with anæmia occurs, the regimen should be rich and nutritious, and such medicines as digitalis, convallaria, strychnia, and iron prescribed boldly and continuously until the danger is arrested, and the equilibrium of the body is regained.

# BRITISH HOMOLOPATHIC SOC

# SOCIETIES' MEETINGS. BRITISH HOMEOPATHIC SOCIETY.

On Thursday, April 1st, Dr. Dudgeon read a paper entitled, Thoughts Suggested by Work on the New Materia Medica. He said that when it was suggested to him that he should read a paper to the Society on this subject he accepted the task without realising what he was undertaking; for when he came to review the principal thoughts that had occurred to him while engaged on the work he found they were mostly of a very unedifying kind. The charateristics of the various provers and recorders of provings, their frequent long-windedness and want of lucidity, were often painfully impressed upon him. But such thoughts as these were of little use to the Society, and therefore he had set himself to think other thoughts on the subject. reviewed the history of the proving of medicines and criticised the merits of the different provers. After the provings by Hahnemann, the next in importance were those of the Austrians. Professor Jörg, of Leipsig, who undertook to confute homeopathy by provings of his own, succeeded in confirming Hahnemann in almost every particular, and has left admirable provings, of which he himself made nothing, but of which Hahnemann's followers have made very much. The provings of Nenning were severely criticised, and those of Lembke were pronounced prolix though in the main sound.

Dr. Pore said the paper showed how dependent we were upon the integrity of provers; not only was the responsibility of provers considerable, but also the duties of the sifters, Dr. Dake and Dr. Hughes. The provings now recorded in the Cyclopædia were absolutely reliable. He said he thought more favourably of Lembke's provings than the essayist. What we wanted now was an index, but this could not appear till the work was

complete.

Dr. Cooke (of Richmond) said that he, as a beginner, had found great difficulty in believing that medicines produced the multitude of minute symptoms put down in the symptomatologies. He thought that the best plan would be to prove a drug upon himself, and he accordingly selected *Cedron*, taking doses from 1 up to 16 grains. He did not get more than a fourth of the symptoms given in the books. Then he took these symptoms for a guide, and tried what the drug would do as a curative, and he certainly found it had extraordinary effects.

Dr. Nield said he had listened with great pleasure to the remarks of Dr. Cooke. He (Dr. Nield), from great press of work, had constantly found that one's ordinary knowledge of drugs stood in better stead than the detailed provings, and instanced *Elaterium*, where squirting diarrhoea was the main symptom. Short provings in the order in which they occur are

much more useful to junior practitioners than the detailed

provings.

Dr. DYCE Brown said, in reply to Dr. Cooke, that provings made by one man were one-sided provings. On himself he proved *Conium*, increasing gradually up to 7 drachms, both of tincture and succus, without effect upon himself.

Dr. Renner asked what the "key-notes" were which determined use of drugs. How were we to determine the relative

value of different symptoms?

Dr. Hughes would add to what Dr. Dyce Brown had said in reply to Dr. Cooke, that the order in which his symptoms under Cedron developed might well have differed from that of the Materia Medicas, as the latter was artificial; and that the therapeutic applications of the drug would doubtless be enlarged by his proving, which he hoped would appear in one of our journals. In speaking of Elaterium Dr. Neild, he thought, was quite right in wishing the fundamental pathological action of a drug put in the foremost place; but to differentiate it from others having a similar action we needed also the finer shades of its working. He expressed his warm appreciation of the paper read, and took the opportunity of saying that Dr. Dudgeon's aid had been to the editors of the Cyclopædia simply invaluable and indispensable. The thought that had most frequently occurred to his own mind while working at this undertaking had been the singular worthlessness of the contributions to the Materia Medica of what he might call the sub-Hahnemannic epoch. When he studied the lists of symptoms without any information as to how they had been obtained, which were then published as pathogeneses, he hardly knew which most to wonder at—the audacity which could put forth such things, or the credulity which could accept them. Their authors were not only the Mures, Houats, and Nennings whom Dr. Dudgeon has so justly stigmatised. Among them he was compelled to include Petroz of France and Hering of America. The symptom-lists issued by the former, purporting to be obtained by the dilutions from the 4th to the 6th, contained a number of utterly impossible phenomena; and only one of them—that of Asteria rubens—had as yet been found admissible into the Cyclopædia. Constantine Hering, though belonging to the ultra-Hahnemannian school, he had once supposed too shrewd to partake very largely of its illusions. In his last work, however, the Guiding Symptoms, he found in his prefaces to the several medicines a constant preference of the bizarre and apocryphal over that which rested on solid ground. Langhammer (of whom Dr. Dudgeon has told us enough) is singled out by him for commendation as a prover; and Houat's inventions are admitted in toto. On the other hand, Agaricus is said to be "over-proved," because of the splendid experiments of the

Austrian Society; Arsonicum is declared rarely applicable in practice, because its pathogenetic effects are mainly taken from cases of poisoning, and are "too like" the symptoms of disease; and we are informed that we have no real knowledge of the physiological action of Atropia! One who can judge thus perversely is hardly to be trusted as a conductor of provings. and those issued by him have been found to be of very inferior quality. It is from the burden of these pathogeneses that the present revision of the Materia Medica would free us; and only those who had worked at it knew how much rubbish had had to be cleared away.

Dr. Roth (in the chair) said Langhenry and his (Dr. Roth's) brother were persecuted for their efforts to sift the symptoms.

Dr. Dudgeon said that as his paper had not been criticised there was no need for him to say anything in reply. He had alluded to Langhammer's unsatisfactory provings, and he could say that if any one took the trouble to examine them he would find that with strange perversity he recorded dilatation or contraction of the pupil as the effect of all the medicines he proved which we should have thought least likely to cause those symptoms, while all the medicines which we should have expected to produce this phenomenon, in his provings did nothing of the sort. Thus among the medicines which produced in him dilatation or contraction or both, we find angustura, arnica, aurum, calcarea acetica, cina, drosera, cyclamen, arsenicum, cocculus, ledum, menyanthes, ipecacuanha, mercurius, manganese, muriatic acid, oleander, phosphoric acid, sambucus, stannum, staphisagria, taraxacum, ruta, thuja, verbascum, whereas neither contraction nor dilatation are observed from digitalis, helleborus, or hyoscyamus. Such anomalies destroy our confidence in this person's provings, and no doubt many of Hahnemann's fellow-provers are equally untrustworthy.

#### HAHNEMANN ANNIVERSARY DINNER.

According to our announcement last month a number of the members and friends of the British Homosopathic Society dined together at the Holborn Restaurant on Saturday, April 10th, the hundred and thirty-first anniversary of Hahnemann's birth. About 60 members and guests sat down to dinner, and Dr. Mackechnie, of Bath, President of the Society, presided. He was supported on his right by Major Vaughan Morgan and Dr. Dudgeon, and on his left by Mr. Cameron and Dr. Kitching. At right angles to the centre table ran two parallel tables, at which the bulk of the members were seated, presided over by the two vice-presidents of the Society, Drs. Roth and Hughes.

The dinner, as has already been stated, is the revival of an old custom, and the success that has attended the revival is a sure augury that it will not again be allowed to drop. The opportunities possessed by members of the homeopathic body, living at distances from each other, of meeting in a friendly way are very few, and the best that can be should be made of them. Among the members from a distance were Dr. Mackechnie (the President) and Dr. Percy Wilde, from Bath; Dr. Pullar, from Edinburgh; Dr. Kitching, of Cape Town; and several from the neighbourhood of London.

After the usual loyal toasts had been proposed and drunk, the PRESIDENT proposed "The memory of Hahnemann." He referred briefly to the enormous debt mankind owes to the genius of our Master, to the duty that devolves upon us, his followers, of keeping his memory green, and of carrying forward the work he had begun. The toast was drunk (as always) in silence. Mr. CAMERON proposed the next toast, "The memory of Dr. Quin," the founder of the British Homeopathic Society. Mr. Cameron was one of Dr. Quin's most intimate friends, and he referred in eulogistic terms to the benefits conferred on homeopathy by Dr. Quin, from the high position he held in Society, and as the founder of the London Homeopathic Hospital and the British Homeopathic Society. This toast was also drunk in silence.

Dr. Dvor Brown, in the absence of Dr. Pope (who had been compelled to leave), proposed "Prosperity to the British Homosopathic Society." He spoke of the value of the Society to the individual members in providing a meeting-place where they could have friendly intercourse with each other, where their angularities could be rounded off, and where their experience could be brought to the light of discussion, and false inductions corrected by the experience of others. He regarded the British Homosopathic Society as the metropolitan of all the Homosopathic

Societies of Great Britain.

Dr. HUGHES, who, like the previous speakers, met with a very cordial reception, responded to the toast. He hoped the Society would continue to work on for another forty-two years. The Society, he said, intends for the present to hold up unflinchingly the flag of homeopathy and sustain it in the face of opposition, and the time will come when those who oppose it now will come to its professors to learn of them. Then the unnecessary schism will be healed. This is the external function of the Society. The Society has also an internal function. In addition to the promotion of brotherly feeling and mutual edification spoken of by Dr. Dyce Brown, the Society sought, by publications, to develop the method to the practice and furtherance of which our The speaker referred to the latest work lives are devoted. undertaken by the Society—the production of the great Materia Medica of our system. In this work, which would require eight or ten years to complete, and which will cost thousands of pounds, the Society has the active co-operation of the sister Society in America, the American Institute of Homocopathy.

When this work is completed homoeopathy will be in a better

position than ever before.

Dr. Roth proposed "The Visitors." He said we should not so much regard their numbers as their quality; there were represented that evening among the Society's guests the scholastic profession, the civil service, the law—and lawyers had done homeopathy very good service, though the only law homeopathists have a supreme interest in is the law of Hahnemann -the medical profession, and last, but not least, the military profession in the person of Major Vaughan Morgan, with whose

name he coupled the toast.

Major Vaughan Morgan said the visitors were much obliged for the reception accorded them. They felt they had spent a very pleasant evening with very good fellows, and they hoped they would be invited next year. Speaking of the Prize Essay, the Major announced that twelve had been sent in to compete. Alluding to the letter he had addressed to the medical men practising homoeopathy, he had not yet received many replies but no doubt they were coming. The laity had made up for the deficiencies of the profession-doctors were always so much occupied—and already half of the fund necessary for the £500 endowment had been received. They were determined to have the

The proceedings of the evening were enlivened by music provided by Mr. Richard Mackway, who volunteered to Dr. Blackley the services of himself and friends when he heard the dinner was to take place. Dr. Blackley proposed the health of Mr. Mackway, who responded briefly to the toast.

Dr. Dudgeon proposed the health of Dr. Mackechnie, the President, who had come all the way from Bath to be present on that Dr. Mackechnie, who was loudly cheered, replied.

and the proceedings were brought to a close.

# ALLOPATHIC HOMCEOPATHY.

"Gleams of a fruitful suggestion."-Jonathan Hutchinson, F.R.C.S.

# ANTIMONY IN SKIN DISEASE.

In a paper which appeared in a recent issue by Dr. De Noé Walker an instance is given where the action of Bromide of Potassium in causing and curing Acne is ascribed to "stimulation." We quote below extracts from a paper on the use of Antimony in skin diseases, which appeared in the Practitioner of March of last year. The case the writer relates is one of great interest, and illustrates the range of action Antimony possesses in skin affections. It also shows that we need not always attenuate medicines

in order to obtain their curative effects. But the most curious portions of the paper are those in which the author brings out, with the most charming naiveté, venerable principles of our own as if they were something quite new. But when Dr. Spender comes to " explain" the curative action, of course the specific action on the healthy skin is left out of account. But he does not, like the reporter of the cures mentioned by Dr. Walker, attribute the curative action of Antimony to "stimulation"—with him it is "contrastimulation" and "antiphlogosis." How long, we wonder, will men who ought to be learned continue to beguile themselves with long words! What does "antiphlogosis" mean, we should like to know, more than taking down inflammation? and what advantage has it over plain English? It has every disadvantage. But we must expect educated people to still go on "explaining" the powers of a drug to reduce inflammation by repeating that wonderful word "antiphlogosis," which means exactly the same thing, though it looks as if it meant so much more. It is just like professing to "explain" a dog by saying that its Latin name is Canis.

We go on to quote from Dr. Spender's paper. We have italicised some of his ingenuous remarks:—

- 46 On the Use of Antimonial Wine for certain Diseases of the Skin; with Notes on its Administration in Comparatively Small and Frequent Doses.
- 46 By JOHN KENT SPENDES, M.D. Lond., Physician to the Mineral Water Hospital, Bath.
- "A therapeutic chord which had long slumbered was made vocal again when Mr. Malcolm Morris read a paper at the Liverpool Congress of the British Medical Association on the 'Utility of the Tartrate of Antimony in the treatment of certain Diseases of the Skin.' . . . . Tartrate of Antimony has no partiality for any special texture [!]; its eclectic power makes it helpful in stopping the evolution of the inflammatory process anywhere—equally in solid glands and on free surfaces. And as inflammation may occur wherever there are nerves and wherever there are blood-vessels, so the remedial force of Tartrate of Antimony is co-extensive with every tissue of the human body."

"But here the important principle steps in that we should aim to get all the good out of a medicine with as little as possible of its harm. For the very goodness of it connotes its certainty to do harm

<sup>&</sup>quot;Our great English thinker, Samuel Taylor Coleridge, resembled Goethe the happy audacity with which he sometimes started speculations outside his own large province of knowledge. Thus he says (Table Talk, May 23, 1830), 'The study of specific medicines is too much disregarded now. No doubt the hunting after specifics is a mark of ignorance and weakness in medicine; yet the neglect of them is proof also of immaturity; for, in fact, all medicines will be found specific in the perfection of the science."

when misused. To label a medicine as 'dangerous,' or as a 'poison,' and then to write a moral essay on the sin of administering such a thing to a patient, is like telling the world that we do not understand the bare postulates of our art.1 It is a confession of impotence, and acknowledgment of incapacity which is almost a shame. We are entrusted with engines of tremendous power, and we shout to the bystanders that we do not know how to use them. And yet the machinery of every one of these engines is endowed with exquisite delicacy of operation. Now my plea on behalf of Tartrate of Antimony is that it is a weapon of many grades of power; that although the traditions surrounding it are dark and deadly, they have come mainly from its use in wrong doses or at wrong times; and that the sound philosophy of the new therapeutic learning ought to guide us in this matter. From whence does the craze for new drugs arise, but because we do not carry into practice all that the old drugs will do? And why is Antimony so put away from us, as if we feared to launch a force which we cannot control?

"I will now relate a case which illustrates the title of my paper; and a comment will be added on the way in which the

treatment was successful.

"In October, 1883, a married lady, aged fifty-two, and living in the southern part of Somerset, was entrusted to my care by my old King's College friend, Dr. Edward Liddon of Taunton. Before 1877 her health had been almost uninterruptedly good. In the autumn of that year she began to have psoriasis, mostly in the form of psoriasis guttata; the spots were dispersed over the body, although most thickly on the outer sides of the limbs; but on the upper arms and on the lower parts of the thighs there were a few larger patches. For this skin trouble she stayed in Bath for a few weeks under the direction of the late Dr. Falconer, and bathed nine times in the mineral waters. Areenie was prescribed for her shortly after leaving Bath, but this did not prove so beneficial as Dr. Liddon expected, and ultimately she was cured for more than five years by the administration of 'tar capsules.'

"In the summer of 1883 the psoriasis gradually returned, and was not now amenable to tar or any of the usual remedies. She was therefore advised to come to Bath, and bathing in the

<sup>1 &</sup>quot;An accomplished physician, to whose writings we all owe much, speke at the Belfast meeting of the British Medical Association against the 'dangerous tampering with the human organisation by strong agencies;' but this same physician seems to have been the author of a paper in the Edin. Med. Journal for April, 1860, in which he praises the use of Antimony in the treatment of tubercular pneumonia. He gave 'small doses of Antimony with diffusible stimulants,' notwithstanding weakness and exhaustion; and adds that Antimony is 'sometimes so well borne that I have given halfgrain and even one-grain doses to patients who were so weak as to be utterly unable to raise themselves in bed!"

thermal waters was begun early in October. Two or three baths were taken every week, according to weather and other circum-The eruption was partial, and was distinctly most severe on the limbs; on the thighs were big patches, with scaly edges and red fissured centres; there was a look of lichen agrice here and there, and the same patch might vary in complexion from day to day. Even the intermediate sound skin was always floridly pink; and the face, although free from disease, appeared more or less congested. The forearms and backs of the hands were in the very thick of the trouble. Although the irritation was severe, my patient refrained as much as possible from scratching. The general health was in fairly wholesome order, except that the bowels were not sufficiently moved and the urine was sometimes scanty and turbid. As usual when we are somewhat out of our depths, the facile hypothesis of 'gout' was welcomed as a solution of all enigmas; but the charm of words did not cure the disease.

"Matters drifted on without much change until the end of November. The thermal baths were soothing in every way; but the area of affected skin was not lessened, and the prospect of recovery was as remote as ever. 'Tar capsules' were prescribed again without the slightest benefit. One day, without warning, and only as the apparent result of a change of wind to a cold quarter, there was an acute and violent exacerbation of the disease; the hyperæmia of the patches became suddenly more intense; the 'sombre red' deepened to a purple red, and the whole surface seemed verging on pityriasis rubra. Whence all this tumult? What made blood and nerves behave so unseemly all at once? There was little pyrexia; there was hardly any change of function; what did the storm mean?

"It is useless to speculate on the misbehaviour of nerves and blood and skin. The outward and visible facts were before us, calling loudly for the sharp and decisive intervention of medical aid. The honour of medical art was at stake. It was hinted that some treachery in the Bath waters had aggravated the disease; that too many baths might have been taken; or that some medicine would have prevented the disaster. It was certain that personal confidence would be withdrawn unless immediate relief were afforded.

"Firstly, then, the patient was kept absolutely in bed, and in a bedroom in which a uniform and moderate temperature was maintained both night and day. 'Milk diet' was allowed without stint, with plenty of cooked fruit and vegetables. Aperient salines and diuretics were prescribed, among the latter being Acetate of Potash and Wine of Colchioum. This preliminary therapeutic skirmishing prepared the way for the chief thing to be done; I recollected and re-studied Mr. Malcolm Morris's paper, which seemed apposite to my present needs; but his proposed

doses of Tartrate of Antimony struck me as inadequate, and administered at too long intervals. Securing the willing services of a lady friend, who promised precision and punctuality, we began our therapeutic task with a vigour and an enthusiasm which gave our patient courage and cheer, and were an omen of sure success.

"On December 1, 1883, twenty minims of Antimonial Wine were added to each dose of the previous medicine, simply as a test of the tolerance of the system for Tartrate of Antimony. This was repeated four times in the day. No physiological or

other effect was perceived.

"On December 3 a mixture was prescribed containing in each dose fifteen minims of Antimonial Wine and fifteen grains of Acetate of Potash, with a few minims of compound Tincture of Lacender and Chloric Ether. This was taken every two hours from eight in the morning to ten o'clock in the evening-eight doses altogether. No sickness was produced, not even the slightest nausea; the solid and liquid food was relished as much as ever. On December 5, and again on the 7th, the same medical orders were given; and fifteen minims of Antimonial Wine, combined as before, were taken every two hours during the daytime until twelve o'clock at noon on December 10. On this day a longer interval was allowed between each dose; and during eight days (namely, from December 10 to 18) twenty minims of Antimonial Wine were taken every three hours, or six doses during the daytime. On December 18 four doses were ordered during the day hours. My patient left Bath for her country house on the following day, with instructions to leave off the medicine by degrees, and to take at least two doses daily until her return.

"Now what was the result of all this therapeutic business, obediently begun and loyally carried through? Literally there was no interruption whatever to a perfect recovery. On December 7, the sixth day of the treatment, the change for the better was so marked as to surprise and please the patient; the hypermmia was greatly diminished everywhere; and irritation was so far relieved that sleep was possible and existence was no longer By the 10th of December the desquamation had ceased, and only dark red spots marked the places where the acute exfoliative process had gone on. These stains lessened in tint, became in their centres more like the neighbouring skin, and on the 19th (the day my patient left Bath) resembled the purple hue of a fading erythema nodosum. Permission was given to the convalescent to come downstairs a few days before her journey. A few doses of Carlsbad salts were necessary, because the confinement within doors caused some constipation of the bowels. When she came back to Bath she said that she was quite well; and now (January, 1885), after a lapse of nearly fourteen months, she has never seen a speck or spot on any part of the body.

"Toxically, this patient suffered no more than if she had taken so many rations of cold water. To the many inquiries about nausea, the same answer was always rendered, that she felt nothing at all. The Tartrate of Antimony produced no sensible physiological action. Though I prohibited food within an hour after each dose when the doses came so frequently, the precaution seemed superfluous. Elimination of the medicine must have been free, because the urine was abundant, and never contained albumen. Imprisonment in bed was ordered at first, to economise vital force, and to prevent the possibility of a 'chill.' I find that a few minims short of seven ounces of Antimonial Wine were consumed altogether, equivalent to very nearly fourteen grains of Tartrate of Antimony; and the administration of this quantity was spread over about seven weeks.

" Now I believe that the whole secret of our therapeutic success lay in this germinal principle, the prescription of comparatively small and frequent doses. Any attempt to do the work on other lines would have met with stern physiological resistance, and probably with the still sterner resistance of the patient if she found that every healthy function was outraged by a medicine presented under a remedial disguise. But for the condition of things with which I had to do battle on December 1, what else could have been done? Was there any other rational scheme of medication possible? No outward means promised any benefit; nor could I have expected submission to a complex system of ointments and lotions, when immersion in the Bath waters had been proved so unequal to the emergency. All other considerations being decided in the negative, there remained only that fine ancient 'antiphlogistic' medicine, Antimony, celebrated by Sydenham and a host of the old masters. Nearly eighteen years ago I illustrated the thesis that Tartrate of Antimony may be given to an adult person every hour in the dose of  $\frac{1}{18}$  of a grain, and repeated from sixteen to twenty times, with the certain result (barring very rare contingencies) of utterly dissipating an early local inflammation. In this manner one grain may be taken not only without causing the least poisonous commotion in the body, but sometimes without even the physiological ripple of an excess of sweating.2 The local disease (or threatening disease) is removed without the toxic disease of the medicinal agent taking its place. And all other things being the same, a metallic

2 "Pope puts it with epigrammatic neatness—

<sup>1 &</sup>quot;Brit. Med. Journal, 1867. The subject is fully developed with regard to a number of drugs in my paper entitled 'On the Administration of Medicines in comparatively Small and Frequent Doses,' contributed to the Brit. and For. Med.-Chir. Review, January, 1872."

<sup>&</sup>quot;'As poison heals, in just proportion used."

salt may thus work with certainty and safety, and its effect may be calculated with almost mathematical precision and definiteness."<sup>1</sup>

1 "An example of one of the four experimental methods of J. S. Mill, the method of difference. It is the essential nature of this method to introduce into the pre-existing circumstances a change perfectly well defined.—System of Logic, i. 399."

# INSTITUTIONS.

#### LONDON HOMEOPATHIC HOSPITAL.

#### THE BAYES WARD.

THE Board of Management of the Hospital in their last Annual Report acquainted the supporters and friends of the Institution with the fact that "The Bayes Ward, founded in memory of the late Dr. Bayes, has remained unoccupied for want of funds," and, in view of the extended operations of the Hospital, expressed their earnest desire, "so soon as it might be possible, to fully equip that ward—one of the best in the Hospital—and throw it open for the admission of patients."

#### THE BAZAAR AND FANCY SALE.

As one of the means of achieving the desired end, the Board have thought it advisable to organise a Bazaar and Fancy Sale, to take place on Friday, the 4th, and Saturday, the 5th, of June next, and they have been so fortunate as to secure the consent of the following ladies, assisted by their friends, to superintend the various stalls:—

Mrs. Vaughan Morgan, 5, Boltons, South Kensington, S.W.; Miss Barton, 8, Lowndes Square, S.W.; Miss Isabella Barton, 8, Lowndes Square, S.W.; Mrs. Cameron and the Misses Cameron, 55, Redcliffe Gardens, South Kensington, S.W.; Mrs. Bax-Ironside, 7, Norfolk Street, Park Lane, W.; Miss Loring, 14, Montagu Street, Portman Square, W.; Mrs. Yeldham, 10, Taviton Street, Gordon Square, W.C.; Mrs. Süss-Hahnemann, 14, Highbury Crescent, N.; Mrs. Matheson, 4, Granville Place, Portman Square, W.; Mrs. and the Misses Dudgeon, 53, Montagu Square, W.; Mrs. Neville Wood, 10, Onslow Gardens, S.W.; Mrs. Carfrae, 4, Hertford Street, Mayfair, W.; Mrs. Blackley, 2, Gordon Street, Gordon Square, W.C.; Mrs. Bayes, 88, Lansdowne Place, Brighton.

These constant friends of the Hospital have also kindly consented to receive at their residences Gifts of Useful or Fancy Articles for disposal at the Bazaar, as well as Gifts of Money, and it is earnestly hoped that the liberal workers who have so generously helped on former occasions, and many new friends of

the Hospital, will encourage those ladies who have taken charge of stalls, by supplying them with all the various articles and gifts which the organisation of a Bazaar suggests. Early intimation of an intention to contribute sent to any of the ladies above mentioned will be highly esteemed. It is proposed to arrange a special stall for the sale of Clothing for the Poor, and work suitable for charitable purposes will be most acceptable.

#### THE FINE ART DISTRIBUTION.

In connection with the Bazaar, but on a day not yet fixed, a Fine Art Distribution, on the model of the distribution which was so successful a few years ago, is being organised. The date, with list of prizes, and the subscription for tickets, will be announced as early as possible, and under the arrangements proposed every holder of a ticket will secure a prize in the Fine Art Drawing. The Board earnestly hope that the numerous friends of Homeopathy, associated with Art in its various forms, will consent to aid in the Fine Art Distribution by presenting, or inducing their friends to present, Works of Art, such as Oil Paintings, Water Colour Paintings, Drawings, Etchings, Engravings, Photographs, Paintings on China or Silk, Medallions, Jewellery, Statuary, Vases, China, Rare Pottery, or other Objects of Art, suitable for greater or smaller prizes. The receipt of early promises of such gifts (which should be received not later than Monday, May 31st) would be of great assistance in facilitating the issue of a proper List of Prizes.

#### BATH HOMCEOPATHIC HOSPITAL.

This hospital has now been in existence thirty-six years. presenting the Thirty-sixth Annual Report the hon. secretary was able to announce that 98 in-patients had been treated during 1885 and 5,682 out-patients; 1,400 visits having been paid to urgent and necessitous cases at the patients' own homes. The chair was taken at the annual meeting by the Mayor of Bath, who spoke in appreciative terms of the usefulness of the institution, and to which he promised to give his support. He alluded to the great loss the hospital, and indeed the whole community, had sustained in the death of Dr. Holland. Dr. Holland's successor in practice, Dr. Mackechnie, has been appointed one of the honorary medical officers in his place, along with Drs. Norman and John P. Aston. The veteran Dr. George Newman is the honorary consulting physician, and Dr. Percy Wilde is stipendiary medical officer. We make the following extract from the medical report :--

"It might reasonably have been supposed, when this hospital was founded thirty-five years ago, that the need of its existence, as a

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special institution, would by this time have passed away; but as those who understand the principle of treating disease, known as homoeopathy, are as severely excluded from holding appointments at general hospitals and dispensaries as at any former time, it is still necessary that this and similar institutions should exist, in evidence of these principles and for the cultivation and advancement of this branch of the healing art.

"When this hospital was founded homoeopathy was comparatively little known. To-day it is accepted as the best mode of treatment by 20,000 medical practitioners; and the people who are ready to bear

testimony to its efficacy must be numbered by millions.

"But the business of the hospital is not only to testify to a principle in medicine, but to share with all medical charities in the good work of ministering to the sick. Under our new rules, any sick poor person can obtain immediate medical attendance, either at the hospital or their own homes, without first obtaining a subscriber's ticket. Although this is not so widely known as it should be, it has greatly increased the number of patients, suffering from acute disease, who have applied for relief at the hospital."

#### BRADFORD HOMCOPATHIC DISPENSARY.

During the year ending December 31st last Dr. Morehouse removed from Bradford to Worcester, and the Bradford Homeopathic Dispensary passed under the medical care of Dr. Matthew Wilkins Gutteridge. We are glad to find that a large number of patients continue to avail themselves of the benefits of the institution, and that the results are excellent. Bradford is a large and go-ahead town; we trust the dispensary may develop into a homeopathic hospital before very long.

# LEAGUE INTELLIGENCE.

#### CIRCULAR.

A CIRCULAR has been sent by the Hon. Secretary to all homosopathic medical men and chemists, offering to supply a printed card announcing the objects and rules of the League, and a receipt book, with authority to act as local hon. secretaries and enrol members. About fifty requests have already been sent in, and before this appears the cards and books will, it is hoped, have been sent. The numbers are steadily increasing. The first of a series of tracts—one setting forth the necessity for and scope of the League—has been prepared and approved, and will soon be in the members' hands.

#### BIRMINGHAM.

The following letter has been received:-



"To the Secretary of the Provisional Committee of the Homocopathic League.

"DEAR SIR,—At a special meeting of the medical men practising homeopathy in Birmingham, which was held last evening, for the purpose of considering the recent circulars issued anent the formation of the 'Homeopathic League,' Dr. J. Gibbs Blake being in the chair, and all the members of the staff of our Hospital being present, the following resolution was unanimously passed:—

"'That it is our decided opinion that for us, as medical men, to appeal to the public as to the advantages of homocopathic treatment would have the appearance of touting for practice; and we think that any such appeal should be deferred till the League is managed

entirely by laymen.'

"It was understood among us that, in the event of this resolution being accepted by your Committee, to be acted upon, at all events quoad this district, that we should all at once join the League, and

take steps to form a branch in this town.

"Believing as we do that a great cause of 'the unfair policy of the old school' towards us is due to the almost complete ignorance of the rank and file of that school concerning what homosopathy is, and the attitude of its professors towards themselves, we should wish, as a first step, to find some short pamphlet explanatory of the true nature and limits of homosopathy, which we could circulate among the members of the profession in our town and district.

"We also agreed that we should be willing to aid in the distribution of such leaflets, etc., as it is intended to publish, to the extent of giving them to our patients both in private and at the dispensary, but that any further appeal to the outside public should be left in

accordance with the above resolution.

"I am, dear Sir, yours, etc.,

"EDWARD M. MADDEN,
"Secretary to the Medical Board, Birmingham and Midland
"Homocopathic Hospital and Dispensary.
"55, Islington Row, Birmingham, 15th April, 1886."

To this the Hon. Secretary was instructed to reply that the Provisional Committee were entirely of the opinion of their Birmingham colleagues that the movement was a popular one, and should be worked by the people. But in the first instance it was necessary to work through the medical men and chemists in order to reach the public. The Committee would not be debarred from doing good and necessary work by the appearances that the work might present; but they would endeavour to get together a lay Committee as soon as possible, to whom they would hand over the working of the League at the earliest possible moment. With the other suggestions contained in Dr. Madden's letter the Committee fully concurred.

#### OBJECTIONS.

In answer to the circular a worthy colleague sends a reply in which he states his objection to the whole affair—idea, name, and plan—as likely to damage the character of the homoeopathic medical school. He thinks that—

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"If the system is not self-sustained on its own merits as a curative factor in the treatment of disease, I am sorry."

This is strange doctrine. We always understood that the truth needed fighting for and was worth it. If Wilberforce, Clarkson, and Lloyd Garrison had never preached the doctrines of Freedom, does our correspondent think the slaves would ever have been freed?

Dr. Neild's letter, which we publish elsewhere, formulates another objection; but we fail to see that it tells against our movement, though the evil he points out is real enough.

#### TWO YEARS AGO-MEETING AT BATH.

THE following report of a meeting held in Bath in 1884 was written for the World, but not sent at the time for publication. Bearing as it does upon the growing feeling which exists for a more decided action in reference to the professional conspiracy against homeopathy and of the necessity of forming a Homeopathic League, it may prove of interest to our readers.

A meeting was held in Bath on Friday, April 25th, 1884, to consider what course should be adopted in reference to the aggressive action of the British Medical Association, and there were present Dr. Holland, Dr. Nicholson, Mr. Geo. Norman. Dr. Percy Wilde, Dr. Kennedy, Dr. Bodman, and Dr. Fallon. Dr. Richard Hughes, Dr. Dudgeon, and a large number of practitioners communicated their views by letter.

Dr. Percy Wilde informed the meeting that the various branches of the British Medical Association were now passing two resolutions. The one was to exclude any homeopathic practitioner from membership of their Association. was to the effect that if any member of the Association became a homosopath, the Council of the Association were authorised to immediately remove his name. The object of the second resolution was this. It had happened more than once that a member of the Association had become a convert to homoeopathy, but, being known to his fellow-practitioners and being respected by them, they loathed the duty which their tradesunion imposed upon them and failed to expel him. Council of the Association would take care to prevent this in future. Dr. Wilde did not suppose for one moment that these resolutions would take one patient away from any homeopathic practitioner, he was ready to admit that they were resolutions which, at some distant period, would grow into contempt by the natural process of evolution; but he thought that homeopathic practitioners should look at them, not as medical tradesmen but as medical reformers. From this point of view they must excite the very gravest attention, for they conveyed a reproach, never intended by those who passed them, but which was none the less a home-thrust. It was in the year 1851 that the Medical Trades Union passed some similar resolutions, but the question arose, What had homosopaths been doing during the last thirtythree years to educate the medical profession? The history of homeopathy in this country could be divided into two periods. The first was when homocopaths were medical reformers; this was the period of rapid growth, when medical converts to homosopathy increased yearly. The second period was when homeopaths gave up business as medical reformers and clung to the skirts of orthodoxy. From this time a steady decrease in the number of converts has taken place. If any argument was wanted to prove the fallacy of this policy of inaction, to prove that medical reforms must originate outside the profession, not within, we have it in these resolutions. It has been asserted that the medical profession is undergoing reform because, in their never-ending search for drugs which are specific for diseases, they have stumbled upon some of our favourite remedies, and have taken these and used them ignorantly, not knowing when they are indicated and when not, making more misses than hits, and have so done incalculable harm to the principle of homosopathy, of which they know nothing and care nothing.

In our conflict with the medical profession we are no further advanced than we were thirty years ago. We are met at every point by a wonderful and successful conspiracy. Every avenue by which the profession can be reached in argument is closed to us, ordinary professional intercourse is, as far as possible, denied us, and it is as difficult to-day for a homeopath practising in a town alone to get surgical assistance in case of need as it was forty years ago, and as a consequence homeopaths are congregating together in the larger towns, leaving those who live in the country without homeopathic advice, and there are some millions of people in this country who deem this one of the greatest mis-

fortunes that can befall them.

It is here that the question ceases to be a medical and becomes.

a public one.

There are thousands of persons in this country who feel that their health and their lives are placed in jeopardy by the want of homeopathic treatment. There is a gigantic conspiracy to prevent these people from obtaining it; there is a powerful and unprincipled organisation, not only to interfere with the freedom of the public, but which prevents the medical profession from obtaining a knowledge of the principle of homeopathy, and this at a time when no single medical practitioner of repute would



dare to contest the truth of this principle in fair argument. We may have differences of opinion upon the details of this system, but I think it urgent upon us to sink these differences in the cause of medical freedom. There is only one way of securing freedom and of regaining our proper place in the profession, that is by giving the public the opportunity to speak in that decided way in which we know it will speak when given the opportunity.

Dr. Wilde then moved some resolutions which, after some remarks and suggestions from Dr. Holland, Dr. Nicholson, Dr. Kennedy, Dr. Fallon, and the Chairman (Mr. Geo. Norman),

were read as follows:

1. That this meeting shall take steps to form a General

Homosopathic Association.

 The object of which shall be to disseminate a knowledge of the essential principles of homeopathy, and to take such measures as may be necessary to protect the freedom of action of those who prefer to practise or receive homeopathic treatment.

 That this Association shall consist of a central executive with branches in the principal towns of Great Britain. That all persons interested in the welfare of homeo-

pathy be invited to join the Association.

Dr. Wilde stated that before asking the meeting to accept any definite resolutions, he had written to Dr. Dudgeon and to Dr. Richard Hughes, telling them that we intended to make some emphatic protest against the action of the British Medical Association, and had received the following replies:—

Dr. Hughes wrote on the eve of his departure for America, regretting that he could not attend the meeting, and said: "The example set by our Liverpool men should be followed at every place at which the Association meets, so that if not directly, at least indirectly through the laity, they may be shamed into more liberality of sentiment and scientific freedom.

. . . Homocopathy has flourished in America mainly by the bold stand and outspokenness of its votaries. I am one who

could wish the example more earnestly followed here."

Dr. Dudgeon wrote expressing approval of some emphatic protest, and said: "There is a good deal of apathy among homeopaths for public concerns, and I should be glad to see the rising generation as active and zealous as the older ones were in their youth."

Dr. Bell, of Eastbourne, wrote to say he cordially approved of

the resolutions.

Dr. Belcher, of Brighton, wrote in approval of the resolutions,

and offering any assistance in his power.

Dr. Churchill, of Folkestone, wrote: "I shall be quite ready to give my adhesion to any measure that will unite homeopaths both lay and medical, and I only hope the measure proposed may

meet with general acceptance if not universal support."

Dr. Arthur Guinness, of Oxford, wrote regretting his inability to attend the meeting, but promising to do all in his power to promote such an Association.

Dr. Craig, of Bedford, thought the immoral action of the

British Medical Association should be wholly ignored.

Dr. Clifton, of Northampton, wrote agreeing with the proposal,

and pointing out the necessity of new life and vigour.

Dr. Cash, of Torquay, wrote: "I am quite in favour myself of some such method of binding together the lay and medical homosopathic elements in this country, and so forming a society which can look after the interests of those who practise and believe in it."

Dr. Kennedy, of Newcastle, wrote expressing approval and

promising help.

Dr. Pullar, of Edinburgh, in expressing approval of the resolutions, called attention to the fact that he had advocated the formation of such an Association more than a year ago. "It is evident," he writes, "that a united policy must at once be adopted if our school is to maintain even its present position, as the tactics of its opponents are becoming more aggressive."

Dr. Hale, of Rochdale, thought that a registered practitioner with a good cleintèle need not trouble himself about the irregular

proceedings of self-constituted societies.

Letters cordially approving of the proposed action were also received from Dr. Wm. Roche, of Ipswich; Mr. Mansell, of Grantham; Dr. Reed, of Southampton; Dr. Gordon Smith, of Liverpool; Mr. Joseph Blake, of Sheffield; Dr. Rhodes Reed, of King's Lynn; Dr. W. B. B. Scriven, of Dublin; Dr. Thomas Wilson, of Hull; Dr. Wilkins Gutteridge, of Birmingham; Dr. Adrian Stokes, of Exeter; Dr. Wm. Clare and Dr. H. G. Stacey, of Leeds.

Mr. Matthew Thompson, of Glasgow, opened the letter addressed to his deceased father, and wrote expressing his

willingness to assist in forming a branch in that town.

# REVIEWS.

# THE CYCLOPÆDIA OF DRUG PATHOGENESY.— PART III.1

THE third part of the Cyclopædia comes to hand, following the second in very good time. The medicines included are, the

<sup>&</sup>lt;sup>1</sup> A Cyclopædia of Drug Pathogenesy. Edited by Richard Hughes, M.D., and J. P. Dake, M.D. Part III. Arnica—Berberis. London: E. Gould and Son.

concluding part of Arnica, Arsenicum, Arsenicum Hydrogenetum, Artemisia, Arum, Asafœtida, Asarum, Asclepias, Asparagus, Asterias, Aurum, Baptisia, Barium, Belladonna, Atropinum, Bellis, Berberis. Of these Arsenicum and Belladonna are the most important. The symptoms observed on persons poisoned by arsenical wall-papers have, very properly, been placed by themselves. Of course selections only have been made from the large amount of material the compilers had to draw upon; and great judgment has been used in the selection. On the whole, we can say without hesitation that Part III. compares favourably with the two parts already published. In the matter of type, it is not easy to see what has induced the editors to put the proving of Asafœtida, which appears to be a very good one, in small type. And Berberis is such an excellent remedy, we should have thought its proving deserving of large type. But the want of precision on the part of the provers in the matter of the doses they took detracts from the value of the provings, and perhaps justifies the smallness of the type in which they appear.

#### THE POSITION OF THE MOTHER IN THE FAMILY.1

Dr. Frances Elizabeth Hoggan sets forth in this pamphlet in a very striking way the anomaly of the position the mother holds in the family. Happily, family life in this country is founded on something better than the law of the land. If it had not been, there would have been an end of family life long ago. If the British matron did not possess more power in the family than the law allows her there would be a women's rights movement of a kind that would astonish the lords of the British creation. For our laws are in this respect not a bit more enlightened than those of the heathen civilisations of Greece and Rome. By British as well as by Roman law the mother has no rights over her children, although our enlightened legislators, beginning, as usual, at the wrong end, have lately seen fit to give her rights over her own goods and chattels. Dr. Hoggan has done well to show up the disgraceful state of our law in this respect, and we trust that her pamphlet may contribute largely to its being remedied. She argues her point from the scientific as well as the legal aspect, and shows plainly enough that the theories on which the supposed absolute rights of the father are based have no real foundation. Under this head we think her arguments somewhat too materialistic, but they are quite convincing. Happily the laws of the land cannot limit the power of a good woman to influence the lives of her children; but it is

<sup>&</sup>lt;sup>1</sup> The Position of the Mother in the Family in its Legal and Scientific Aspects. By Frances Elizabeth Hoggan, M.D. New Edition. London: John Bale and Son, 87, Great Titchfield Street.

nevertheless a shocking state of affairs that a bad father should have the legal power of taking away his child from its mother, however good she may be.

#### 18 OUR PRESENT SYSTEM OF MILLING AND BREAD-MAKING CONDUCIVE TO HEALTH OR DISEASE?

Mrs. Dance does not keep her readers long in suspense, but answers right off the query she has put at the head of her tractate—"Undoubtedly the latter! and wasteful to a degree." And after reading her arguments, brought forward with so much force and ability, we are fully disposed to agree with her conclusions. Mrs. Dance has invented a method of bread-making of her own. What this method is she does not disclose in her pamphlet, but only the principles on which it is based. the result is excellent is attested by unimpeachable authorities whose letters are printed in an appendix; and Mrs. Dance herself has lived for one month on an exclusive diet of pure meal, and bread and water, "with the happiest results-an enjoyment of life, a lightness and clearness of brain, delightful to feel, and impossible to enjoy on a heavy animal diet." Mrs. Dance tried in vain to obtain permission to exhibit her bread at the Health Exhibition. The Bread Reform League have shown it no favour. The War Office and the Admiralty, in spite of Mrs. Dance's demonstrations of the excellence of her bread, were too much bound by red tape to make any alterations. Mrs. Dance concludes :-

"On every side vested interests retard the valuable bread factory reform; whilst thousands are dying of starvation. England has no bread! I must therefore appeal to the British public at large to aid me with funds to start the first pure meal bread and biscuit factory. £1,000 would enable me to start on a small scale."

The following note is added:-

"The Royal Exchange Bank, 126, Cannon Street, London, will, on behalf of Mrs. Dance, receive subscriptions to provide immediately for the starving, where this true staff of life can be obtainable at wholesale price for the poor, or free to the starving, by means of tickets. Cheques should be made payable to Mrs. Katharine Jane Dance, who is already, at her own expense, providing the meal."

We should have thought the better way of proceeding would have been for Mrs. Dance to have published the details of her process, or to have induced some enlightened baker to take it up. As the bread is of such excellent quality, there should be no difficulty in finding a market for it.

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<sup>&</sup>lt;sup>1</sup> Is our Present System of Milling and Bread-making conducive to Health or Disease? Published by the Author, Mrs. Katharine Jane Dance, 24, Canbury Park Road, Kingston-upon-Thames.

# Obituary.

#### RICHARD TUTHILL MASSY, M.D.

Dr. Tuthill Massy has passed away, at Brighton, at the age of sixty-six, after a lingering illness, beginning in an injury to the spine some years ago, caused by a fall from his gig. Dr. Massy will be missed by a wide circle of friends. His warm heart and cheery nature made him popular and beloved whereever he made his abode; and his literary faculty has made the homeopathic public his debtors. His Mild Medicine had at one time a very wide sale, and his Notes on the New American Remedies has gone through many editions, the last of which (published by Keene and Ashwell) appeared only the other day. Dr. Massy was born in Limerick in 1820. He took the Dublin B.A. and the Glasgow M.D. He first practised homeopathy at Worcester, and came into conflict with the powers of orthodoxy in that city. But all they could do only served to make Dr. Massy more popular. Later he practised at Sydenham, and twenty years ago he went to Brighton. During the last six months the paralytic symptoms increased; he became hemiplegic as well as paraplegic, and finally succumbed to an apoplectic attack.

# WILLIAM ROWBOTHAM, M.R.C.S. Eng.

WILLIAM ROWBOTHAM, fourth son of Samuel Rowbotham, of Congleton, in Cheshire, was born on January 19th, 1819, and died somewhat suddenly on January 17th of this year. William Rowbotham had a strong desire to enter the medical profession in early life, but owing to his father's circumstances was not able to do so. At the age of twenty-three he married, and entered the service of the London City Mission, being stationed at Woolwich. Here he caught typhus fever, and during his convalescence had his attention drawn to homocopathy, and became convinced of its truth. He practised the system in an amateur way among the poor, and in 1855 he retired from the Mission and entered at Guy's Hospital as a student, in the thirty-sixth year of his age. In four years he became qualified, and commenced practice in Woolwich. Here he continued to labour until the very day of his death. He had prescribed for patients only a short time before the end came. He leaves a widow and eight children. Two of his sons are members of the profession.

# NEVILLE WOOD, M.D., F.R.C.P.E.

On the 25th March, at his residence in Onslow Square, S.W., Dr. Neville Wood passed away, after a short illness. He had, indeed, been in failing health for some months past, but had

persevered with his work, and was out within a few days of his death, when the acute and fatal attack of bronchitis overtook him. Dr. Wood graduated at Edinburgh in 1844. He has been many years resident in Onslow Square, Brompton, where he has carried on an extensive practice. Dr. Wood was a homoeopathist of the old school, and always had a preference for the higher dilutions, and his practice was singularly successful. He was the author of a small work on domestic medicine. Dr. Neville Wood was the fourth son of Charles Thorold Wood, of South Thoresby. His loss will be severely felt by a large circle of friends and patients who were warmly attached to him.

#### ALEXIS ESPANET.

(From L'Art Medical, of April, by Dr. P. JOUSSET.)

"In our last number we announced the death of Dr. Espanet, who died, a member of the order, at the Trappist monastery of D'Aiguebelle, on the 27th of February, 1886. Who then was this man who was privileged to unite in his life the two great characters of a member of a religious brotherhood and of a medical man?

"Alexis Espanet, born in 1811, in the department of Var, followed at first the sea as a profession, and was present as a pilot on board the Torche at the battle of Navarino; he was then sixteen years old. The attractions of the sea gave place to a vocation stronger and more lasting—that of medicine; and he gave himself up with enthusiasm to the study of this science at the Faculty of Montpellier. He finished his beloved medical studies, when one of those storms, as frequent in life as upon the ocean, came to wreck what it had become the custom to call his future. But for the soul penetrated with the spirit of Christ there is no real shipwreck, because outside and above the world there is the Friend Faithful and True.

"Espanet had this belief, and he became a Trappist. It was at the Abbey of Aiguebelle that he pronounced his vows. Put in communication with the père Debreyne, whose works on therapeutics are well known, he had to take up again his medical studies. He took his doctor's degree in 1837, and for several years assisted père Debreyne in the service of the hospital which he had founded, near the great Trappist monastery (Orne), and helped him in editing his lectures and his books.

"In 1842, when the Trappists founded the agricultural establishment of Staouëli, in Algiers, père Espanet was sent there in the capacity of doctor. In 1849, under the advice of Petroz and Rapou, he studied and tried homosopathy. The results he obtained modified completely his medical convictions, and he became a fervent disciple of Hahnemann. These results have been recorded in a well-known publication, the Clinique of Staouëli.

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"The Algerian climate tried his constitution severely; he returned to France, to the great Trappist monastery at Aiguebelle, where he worked with père Debreyne on several important works; then, more and more fatigued, attacked by a disease of the heart, which was destined never to leave him, he became entirely unable to follow the rule of his order. It was then that, with the permission of his superior, he reentered the world, and there practised medicine, first at Montelimar, then at Paris, where we have known him for twenty years.

"The brothers Catellan, who have done so much for Hahnemann's reform by creating the homosopathic pharmacy and maintaining in it a tradition of science and honour, offered hospitality to Espanet. Under their roof he found peace, and

the means of giving himself up to his medical studies.

"From 1851 to 1879 he published several works, among which we must specially mention the Treatise of Materia Medica and Therapeutics, a volume of 850 pages, published in 1861. He assisted in the work of the Bulletin de la Société Homocopathique, and took part in the homocopathic congresses which assembled at Paris during the last twenty years. Perceiving himself mortally attacked by a chronic endocarditis, he resolved to return and end his days at the monastery of Aiguebelle. There he died in the midst of his brother monks, whom he edified by his courage and Christian resignation.

"Espanet was beloved by all who knew him. He was not one of those strong and violent natures, born for contradiction and combats, who crush in their strong clasp both error and him who defends it, and who have as many enemies as they have friends. With a great gentleness of character, he had preserved the cheerfulness and frankness of the sailor; and, although he never made pact with error, he was sympathetic even with those whom he fought. So he has gone, leaving behind him the memory of an upright man, a learned physician, and a lovable confrère."

#### MADAME JEAN PAUL TESSIER.

(From L'Art Medical, April. By Dr. Jousset.)

"We have had the great sorrow of losing the widow of our

master, Madame J. P. Tessier.

"Since the death of her husband in 1862 she lived in retirement with her son, our beloved fellow-worker on the Art Medical. She was for all the direct pupils of J. P. Tessier as a last souvenir of the master, and they bestowed on her the affection which they had had for her husband.

"Another bond is broken, but medical doctrine lives, and the

-school of J. P. Tessier will perpetuate the memory of him who was their great master, the great founder (instituteur) of the nineteenth century."

# GLEANINGS.

#### THE PASTEUR BUBBLE BURSTING.

THE following is from the Weekly Dispatch of April 11th :-

"The death from rabies of a third of the first batch of Russians who have been under treatment at the Rue d'Ulm has, and no wonder, greatly affected M. Pasteur. But he will not admit that it is an argument against his claim to render the bite of a mad dog harmless. For public and private reasons I have gone, of course as a laic, a good deal into the alleged cures effected by that scientist. Well, the evidence that has come within my knowledge has not been satisfactory. I don't find it at all established that the dog which bit Ashworth at Bradford is the one that bit the eight persons who -came over here from that town last month, or the Irishman Garvey. From what came out as to the hour and manner in which Ashworth was bitten, at the coroner's inquest on his death, I indeed fail to see the possibility of establishing the identity of the animal to the bite of which that Bradfordian fell a victim. Two out of the three Russians who have died had wounds which could not be cauterised or 'fired,' as they were so deep down among glands. In the temple of one there was also a bit of the rabid wolf's tooth, which was an uncauterised virus centre. Is it Pasteur or is it the 'firing' by village surgeons of the wolf-inflicted wounds which has so far preserved the rest of the first Russian batch? A young and intelligent lady doctor, Julia Mitchell, who practises in Sloane Street, London, is over here on professional business. She called on me last Sunday, and in the course of her visit said that a scientific commission was being formed in London to inquire into the cures which Pasteur-claims to have effected. I hope the commissioners will not omit to inquire to what extent the Russian village surgeons burned the wolfinflicted wounds. Should the present state of health of the surviving Russians be maintained, I should venture to suggest that it is perhaps because they were searchingly 'fired' wherever a wound was inflicted by the rabid wolf. Goloweski, who died the day before yesterday, was not, to all appearances, so badly injured as some who have survived him, and who are apparently doing well. But he was bitten at about four in the afternoon in rescuing his sister, Endosia or Donia, and then escaped up a tree, where he remained the whole The cauterisation, or 'firing,' was not therefore accomplished for nearly fourteen hours after he was bitten. The virus had thus had time to travel in some distance from the surface of his body. I never saw anything so thorough as the firing by the vrachts, or Russian country surgeons, of all the superficial wounds. The flesh was remorselessly burned into with red-hot irons, so far as these implements could, with any sort of safety, be made to penetrate. "The great proportion of dog-bitten persons who have been treated

at the Rue d'Ulm got themselves cauterised as soon as they possibly could. This fact is not taken into account. Nothing can be more loose than the mode adopted of accepting evidence as to the madness of dogs which inflicted bites. There is also a very loose mode of treatment followed. Where conscientious care is taken is in the preparation of the virus. It is appalling to think, were reckless practitioners to take up Pasteur's system and work it out themselves, what an amount of rabies would be let loose in the world. For this reason alone no favourable conclusion should be jumped to; and as there is a rage to jump in that direction, the warning which I now give will not, I hope, be entirely thrown away. I saw some very frivolous cases treated as serious ones at the Rue d'Ulm. They will be alk reported as the latter at the Institute, and to the General Council of Health and Hygiene. The dog which bit the four American children whose advent in Paris gave such a stimulus to Pasteurism turns out not to have been mad at all. The children were brought here to make them a profitable exhibit in a sort of Barnum show in the-United States.

"When Ivanoff (the second Russian) and Geloweski (the third one)died, it was extremely difficult to obtain information for the newspapers about their final symptoms, and in the last case of the threethere was a wish shown by the doctors to muffle up the truth. What
the Russian doctors said, when pressed, was that Goloweski died of
paralysis of the lungs. Now, rabies always paralyses these organs,
though lung paralysis is not always caused by rabies. There was noreason, except the failure of Pasteur to cure, why the nerves governing respiration should have become paralysed. The last-named
victim of the wolf was suddenly taken with fits of suffocation. Hefrothed at the mouth, but he struggled against pain, so as not to
distress those around him, and died after about twelve hours' illness.
The post-mortem examination was made to-day, but the result of it
has not yet reached me."

# GENERAL CORRESPONDENCE.

# PROFESSIONAL AND POPULAR HOMOGOPATHY.

To the Editor of the Homosopathic World.

Sir,—Last night the British Homeopathic Society dinect together to celebrate the birthday of Hahnemann. While-the occasion is fresh in my memory I would ask your permission to make a few remarks on what was said, and what was not said, after dinner. Considering that the day was a memorable anniversary in the history of homeopathy, perhaps a little more might have been said by the chairman respecting the great man who was born on that day 131 years ago, the venerated chief to whom we owe allegiance, and the greatness of whose services to medicine and the

allied sciences has been only lately revealed in all its extent by a book published at the cost of the British Homeopathic Society. But let that pass; possibly the chairman thought that the mere mention of Hahnemann's name was sufficient in a company of his disciples. As, however, there were some strangers present who might not be supposed to be quite conversant with the transcendent merits of the illustrious reformer of medicine, a few words on that subject might not have been altogether out of place.

The contrast between the meagre notice of the Founder of Homosopathy by the chairman and the eloquent eulogy of the Founder of the British Homeopathic Society by Mr. Cameron must have struck others besides myself. Of course I readily admit the services to homoeopathy and to the Society of the late Dr. Quin, and I quite agree with Mr. Cameron that he was eminently successful in making homocopathy popular and its practitioners respected among the highest ranks of society, in which he moved to the very last. Principibus placuisse is all very well, but the progress of homeopathy is not much advanced by the patronage of the "upper ten." On the contrary, those who have had most to do with practice among the so-called leaders of society are well aware that as a rule they are fickle and inconstant in their medical beliefs, and very apt to forsake homeopathy for any unscientific novelty, and to discard their long-trusted medical adviser for the last fashionable doctor. Though there are some admirable exceptions to this general charge of fickleness among the very highest ranks, noble lords and ladies who have displayed an unswerving constancy to homeopathy, it is not in these exalted regions that we can look for a steady support of our practice. Homeopathy has not thriven under the cold shade of the aristocracy.

Nor, in spite of the eulogistic terms in which all the speakers last night spoke of the British Homoeopathic Society, has it done much, or I may say anything, to promote the external development of homoeopathy. It has been of great service in forwarding the internal development of homoeopathy, by means of the papers read and discussions held at its meetings. It has served as a useful trysting-place for bringing practitioners together and making them better acquainted with one another. It has rendered great service to the scientific elaboration of homoeopathic practice by the publication of the records of its transactions, of a *Pharma*-

copæia and of Ameke's History of Homospathy, and by the generous aid it has given to the publication of some excellent works that could not have appeared without its aid, chief among which is the Cyclopædia of Drug Pathogenesy, respecting which Dr. Hughes spoke so eloquently and truly. It has done good service in maintaining a high ethical standard among its members. Its services in starting the London Homosopathic Hospital are undoubted and are generally acknowledged.

But the British Homocopathic Society has had no influence whatever on the external development and progress of homeopathy either among the medical profession or among the public. The dominant majority of the profession are as much opposed to homocopathy as they were forty-three years ago, when the Society was founded. Practitioners who profess a belief in the homoeopathic therapeutic rule are rigorously excluded from hospital appointments, from public posts, from medical societies. With few exceptions, the medical periodicals refuse to publish papers by them, or even admit advertisements of their works. Most of the colleges and several of the universities have passed rules forbidding professional intercourse with homeopathic practitioners, even though these practitioners may hold their own degrees and diplomas. The British Homeopathic Society has been powerless to remove the ban of professional ostracism from the adherents of the homocopathic school.

Nor has the British Homeopathic Society contributed in the slightest degree to the spread of homeopathy among the public. I do not say this by way of reproach to the Society, but merely as the simple statement of a fact. Being a purely professional society, it could hardly have done this without deviating a little from purely professional objects.

Precisely the same thing may be said with equal justice of the British Journal of Homeopathy. During the forty-two years of its existence it did a good deal for the internal development of homeopathy, and it served as a rallying-point and an organ for the homeopathic practitioners of the country; and, by the expositions of the homeopathic doctrine and the illustrations of homeopathic practice it presented, it no doubt did good service in instructing the earnest inquirers who came forward in considerable numbers in the early years of its career. But I doubt if it made converts in the profession even in those days, and it was without influence on the non-medical public, as it addressed the profession only. It

was partly owing to a conviction that every argument in favour of homosopathy had been exhausted in its pages without producing any effect on the profession that the editors
stopped its publication; and this they did all the more
willingly as its younger contemporaries afforded an ample
field for the consideration and discussion of the various points
of doctrine and practice which continually arise in connection
with a system of medicine.

But unless homeopathy spreads among the public and the profession there is great danger of its dwindling down into insignificance. And is it not so dwindling? I fear this question must be answered affirmatively. The number of the avowed adherents of homeopathy in this country decreases year by year. Not the slightest interest in homeopathy is displayed by the great bulk of the medical profession. Very few take the trouble to ascertain what it is and what it teaches. In my intercourse with medical adherents of the old school, which is considerable, I generally find the profoundest ignorance of what homeopathy is, or a smug conviction that its practitioners have abandoned all the essential peculiarities of homeopathic practice, and only retain the name because they fancy it pays.

I may be told that the spread of homeopathy among the profession is proved by the wholesale appropriation of our remedies by such writers on therapeutics as Ringer and Brunton. But the readers of their books are never told whence these novel remedies are derived, nor is an inkling given of the therapeutic law which led to their selection; the consequence is that the ordinary medical man accepts these medicines as empirical remedies on a par with the more familiar drugs of his materia medica. So that in this way it cannot be said that homeopathy is introduced into ordinary medicine, but only that the remedies of the homeopathic materia medica are swept into the empirical dustbin of the old school.

But we cannot be content with the present state of things. We cannot contemplate with satisfaction the present stagnation of all real advance towards the due recognition of the truth in therapeutics we have inherited from Hahnemann. We have been appealing to the profession for many years past; the profession has been deaf to our appeals. We have neglected for as many years addressing ourselves to the public, and it is only through the public—the patient-world—that the profession will be influenced. In consequence of

our neglect a generation has grown up that knows little or nothing about homocopathy and takes no interest in the subject. The reason of this is that we have not attempted to interest them. In the early days of homeopathy in this country a zealous propaganda existed, which spread far and wide a knowledge of homeopathy by means of cheap popular literature, meetings and lectures. The English and Irish Homeopathic Associations, by their publications and meetings, the popular writings and lectures of the late Dr. John Epps, and especially the popular tracts of our venerable colleague, Dr. Sharp, rendered incalculable service to the cause of homoeopathy. By such means large numbers of the public acquired a knowledge of the homeopathic doctrine and became zealous defenders of its truth. zeal reacted on the medical profession and set many of them to inquire into it, and as a result of these inquiries hundreds of medical men became converts to the new system. We cannot doubt that a similar propaganda would now meet with a like success. The founders of the Homœopathic League entertain this conviction, and are prepared to make a considerable sacrifice of their time and ease in order tospread a knowledge of the truth in therapeutics among the lay public, through whom they hope to influence the dominant majority of the profession to do justice to the scientific therapeutics we owe to the genius of Hahnemann.

The founder of the British Homeopathic Society always set his face against popular appeals to the non-medical public, and he was a declared opponent of the propaganda that did so much to extend a knowledge of homeopathy in its early days, and for this his eulogists commend him. Chiefly owing to this opposition on the part of its founder the members of the British Homeopathic Society, and through them the great body of the homeopathic practitioners of this country, have altogether neglected cultivating that field of popular literature which was at first such a potent instrument for making converts. And see where it has landed us! We are more than ever the pariahs of the profession, every ignorant tiro sneers at us, the medical pressignores us, colleges denounce us, we are forbidden to discuss our doctrines in any medical society, publishers snubus, and the non-medical world looks on with indifference, or perhaps vaguely thinks the treatment is all right and that we must have done something eminently unprofessional to deserve it, otherwise so many eminent physicians and surgeons would not join in this Homoopathen-hetze. We must show this indifferent public that our sole offence is practising a system of therapeutics that is founded on a scientific basis, and has proved itself over and over again to be infinitely more successful in the cure of diseases than the system—or no-system—practised by its persecutors. Your obedient servant,

April 11th, 1886.

R. E. DUDGRON.

#### "LITERATURE WANTED."

### To the Editor of the Homosopathic World.

Sir,—Your correspondent "X." refers to a subject of much importance, i.s., the lack of pamphlets on "What is Allopathy?" Some years ago a unique book was published by Dr. Hastings, entitled "Allopathy and Homosopathy," in which both systems were contrasted in their theory and practice. A second edition of this book has recently been published by the Homeopathic Publishing Company at the expense of John Rylands, who considered that it was a book calculated to expose the system of allopathy, and show both "what is allopathy" and "what is homeopathy," which in some measure might answer "X.'s" purposes.

April 6th, 1886.

J. H. H.

### A NEW DIRECTORY.

## To the Editor of the Homosopathic World.

SIR.—We have recently sent out circulars to all the medical men in this country practising homocopathy, with a form to be filled up, giving information for a new directory of homocopathic practitioners.

In addition to the names and addresses, hours of consultation, and degrees, we propose to insert a list of appointments held

and works published by each medical man.

It is also our intention to insert as many names of colonial and continental homoeopaths as we can obtain, and we ask for the co-operation of all interested in such a work.

The subscription price is fixed at the low sum of 2s., and the

number of subscribers will decide the appearance or not of the directory; but as it has been pointed out to us that a more complete directory is needed, we hope to receive the encouragement which we believe will be given to the project.

Particularly do we ask for information respecting the Colonies, and as this letter will reach many to whom we cannot make personal application, we plead for information from the friends

of homocopathy abroad.

We are, Sir, faithfully yours,

KEENE AND ASHWELL.

74, New Bond Street, London.

#### THE HOMOEOPATHIC LEAGUE.

To the Editor of the Homeopathic World.

SIR,—Will you allow me to say that it appears to me that in order to be consistent as defenders of homosopathy, and as assailants of its avowed antagonists, the medical men who join this association should sign a declaration that their practice is mainly conducted in accordance with the homosopathic law. I have reason to believe, both from admissions in conversation and from observation of practice, that not a few of those whose names appear in the *Homosopathic Directory* do not make the therapeutic law discovered by Hahnemann their ordinary guide in the treatment of disease. I am not of course denying the necessity for the occasional employment of auxiliaries, nor of palliatives in malignant disease.

Now where is the consistency of zealously defending the walls of Troy and assailing its besiegers, if an insidious enemy be

stealthily admitted within its gates?

Malvern, April, 1886.

I am, yours faithfully,
J. HARMAR SMITH.

[We have much sympathy with the purist sentiments of our correspondent, but we fear his views are not very practicable. In this world we can only judge of the professions and outward actions of those with whom we have to deal. We cannot judge motives. Even the net of the kingdom of heaven drew some undesirable fish to land; and the very fishers were not all sound. But the fishing was not to stop for all that. Neither shall we stop in our work because some on our side may not be, in the eyes of others, altogether sound homesopathists. All those who profess a belief in the truth of Hahnemann's law, and are

willing to face persecution for their belief, we regard as our friends, and we welcome their help.—Ed. H. W.]

### To the Editor of the Homeopathic World.

SIR,—By this time the new League is, I take it, an accomplished fact, and although, in common with many of my colleagues, I have entertained grave doubts of the necessity and wisdom of the course proposed, I do most sincerely hope that our fears may prove to be groundless, and that much good may be done for the cause we all have at heart. I should not now have troubled you had I not felt very strongly that the circular issued by the Provisional Committee fails to point out one great cause why homeopathy has not made the progress we feel it ought to have done. This reason is that young practitioners of homoeopathy have been too eager to get hold of better-class practice; and that although dispensaries have to some extent provided for the wants of the necessitous, very little provision has been made for the class above these dispensary patients. The result has frequently been most disastrous: the young aspirant either fails for lack of the experience of human nature and disease which he would have gained by gradually working to the position he essayed to take at the first leap; or if by reason of special aptness he succeeds, his success seldom lasts beyond himself, for at his death or translation to another sphere of labour, his "high-class practice," having no proper foundation, falls like a house of cards, and we have to lament that in such and such a place, where So-and-so had such a splendid practice, now there is so little being done.

Our weapons are undoubtedly superior to those of "our friends the enemy," and if we do not handicap ourselves we can beat them. Let the young men who are coming into our ranks (and I rejoice to think there are many) endeavour to take their places as they would have done had they remained in the ranks of allopathy; that is to say, if from want of considerable pecuniary means they have determined to become general practitioners, let them work like their medical brethren around them, taking, besides any dispensary work they can obtain, all practice, including midwifery, etc., which offers among the better class of working people and small tradesmen, at fees which, according to their means, correspond with those paid by the classes above them. By so doing they may be certain that their success, though it may not be rapid, will be sure; and when the time comes that, having reached the top of the tree, they are compelled to give up their poorer work, others will be ready to take it up, and homeeopathy will go on and increase, having for its broad foundation the confidence of the people at large.

That this is not a mere figment of the imagination is proved by the experience of at least two towns in England that could be named, where this principle has been carried out, with the result that if the whole country had done as well our numbers would now I am, sincerely yours, be doubled. FREDERIC NEILD.

Tunbridge Wells, April 19th, 1886.

### SHORT NOTES, ANSWERS TO CORRESPONDENTS, ETC.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester Road, South Kensington, S.W.

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, Lon-

don, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

Dr. MIDDLETON.—Your letter is too late for this issue; it will appear next month.

#### CORRESPONDENTS.

Communications received from the Rev. Edward Holland, The Manse, Dubbo, New South Wales; Mr. Albert G. Askew, Nottingham; Mr. Hooker, Ryde; Messrs. Keene and Ashwell, London; Dr. Proell, Nice; Dr. Wilde, Bath; Dr. Dudgeon, London.

# BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische Zeitung.—Zoophilist. — Medical Advance. - Monthly Homœopathic Review. — Revue Homocopathique Belge.—Homöopatische Monatsblätter.-New York Medical Times .-American Homocopathist.-St. Louis Periscope.—Medical Advocate. — Clinique. — Medi-Visitor.—Chemist cal Druggist.—La Reforma Medica. — The Guide. — Revista Hom. Catalana.—Hahneman-nian Monthly.—Bibliothèque Homœopathique. — Medical Era.—Medical Annals.—California Homosopath.—The Clinical Review.—Homocopathic Physician.—North American Journal of Homeopathy .-Homosopathic Recorder.—Me-Counsellor. — Medical Current.—L'Art Medical. Chironian.—St. Louis Medical Journal.—Cyclopædia of Drug Pathogenesy, III.—Is our Present System of Milling and Bread-making Conducive to Health or Disease? By Katharine Jane Dance.—Chart of Fevers and Urinalysis.

School of Maria

### THE

# HOMŒOPATHIC WORLD.

JUNE 1, 1886.

### TO BRUSSELS!

As Permanent Secretary of the International Homeopathic Convention, Dr. Hughes has addressed to us a letter which will be found in another part of our present issue, and to which we desire to direct the special attention of our readers. The Congress or Convention will be held on Tuesday, Wednesday, and Thursday, the 3rd, 4th, and 5th of August, at Brussels, as originally announced. Our Belgian colleagues, who undertook to organise the meeting, have found themselves unequal to the task; but the meeting will not be allowed to fall through on this account. Only the work of organisation will pass into other hands. The Permanent Secretary now becomes responsible for the success of the gathering, and we are confident that the appeal he makes for support will meet with a hearty response on the part of his fellow-countrymen and homeopathists all over the world, and not least on the part of our Belgian colleagues to whose succour he has gone.

Through a curious misconception of the powers delegated to them, the Belgian committee, without consulting the permanent Secretary, through whom the authority and the existence of the Convention is transmitted from one meeting to another, when they felt that they could not make the meeting a success, issued a circular stating that the Congress was put off until 1889, when it had better be held at Paris. We have no doubt that our Belgian colleagues were acting, as they thought, for the best; but they were none the less

clearly acting ultra vires; and Dr. Hughes has taken the only proper course open to him in assuming the responsibility of carrying out the resolution of the Convention in London of 1881.

It is unfortunate that this hitch should have occurred in the proceedings; but if it has the effect, as we trust it may, of putting every follower of HAHNEMANN on his mettle-Continental, American, and British-the little misunderstanding may, after all, be attended with the happiestresults. Already a number of our colleagues have intimated to Dr. Hughes their intention to be present, and have sent or promised to Dr. Dudgeon (who has consented to act as treasurer) subscriptions towards defraying expenses. question of the language of the Congress is not yet settled. It was to have been French, but the alterations in the management may necessitate an alteration in this respect. Dr. HUGHES will be most happy to receive papers—and the sooner the better-from those who are willing to contribute them, in whatever language they are written. Let it be remembered that there is no British Homeopathic Congress this year; and the corresponding Congress of German Homoopathists has also been postponed in order that all energies may be concentrated on the International Conven-For the reverence we feel for the memory of HAHNE-MANN we must make this Congress a signal success. Brussels is easy of access. In our next issue, in addition to the programme of the meeting, we hope to give particulars of the different routes and of hotel accommodation. Let there be no abstentions that can by any possibility be avoided. The world and the fair fame of HAHNEMANN expect that every man will do his duty.

# THE ELEMENTS OF HOMŒOPATHY; OR, HOMŒOPATHIC APHORISMS.

# I.—THE LAW.

1. All medicinal substances have the power of causing disease when given to persons in health.

- 2. Each medicine has a power of producing disease peculiar to itself.
- 3. This power can only be known by studying the symptoms it has produced when given to persons in health.
- 4. HAHNEMANN was the first to systematically study the powers of medicines in this way; taking them himself when in health, and giving them to his friends; observing and recording the effects which followed.
- 5. This he called "proving" medicines; those who allowed themselves to be experimented on he called "provers;" and the records of the symptoms produced he called "provings."
- 6. Out of these provings he constructed his *Materia Medica*; so arranging the symptoms of each drug as to present a picture of its disease-producing power.
  - 7. Drug-diseases resemble natural diseases.
- 8. The Law of Similars affirms that, in a given case of natural disease, that drug which has produced a morbid state most like the disease to be treated, will be the most certain, when administered, to work a cure.
- 9. The practical rule which is the outcome of this law is formulated thus:—
  - "Similia similibus curentur."
  - "Let likes be treated by likes."
- 10. Homeopathy is the art of selecting and administering medicines in accordance with this rule and the principle on which it is founded.
- 11. A medicine is said to be homoeopathic to a given diseased condition when it has produced a similar diseased condition in a healthy person.

# II.—THE DOSE.

- 1. The susceptibility to the action of medicines varies greatly in different persons.
- 2. It also varies in the same person in health and in disease.
- 3. In disease the human body is infinitely more susceptible to the action of a drug which is homeopathic to that diseased condition than it is to the action of the same drug

in health, or to the action of a non-homocopathic drug in disease.

- 4. A drug which must be given in a large dose to produce a morbid condition, will remove that condition arising from other causes, when given in a dose exceedingly small.
- 5. One and the same drug may be homosopathic to a great variety of diseased conditions.
- 6. All that is needed is that the leading symptoms of a disease should find their counterpart in symptoms produced by the drug.
- 7. The drug may have produced many other symptoms which do not correspond to symptoms of the disease besides those which do, but this in no way impairs its efficacy.
- 8. When in disease we wish to evoke one part of the action of a drug for the cure, without exciting those other disease-producing powers of the drug which are not homeopathic to the case, we are able to do so by diminishing the dose.
- 9. We are enabled to do this because of the increased susceptibility in disease, and because this increase of susceptibility only extends so far as the drug is homoeopathic.
- 10. We can in this way use the most deadly poisons in disease without fear of producing anything but good effects.
- 11. For this discovery, and for the invention of an effectual method of graduated attenuation of medicinal substances, we are also indebted to HAHNEMANN.
- 12. There are some substances which, though inert or nearly so when taken in their natural state, become, when finely divided after Hahnemann's method, powerful agents both for deranging health and restoring it when deranged.

AMERICAN GRADUATES AND ENGLISH QUALI-FICATIONS.—SOCIETY OF APOTHECARIES OF LONDON.

THE first step to be taken by an American graduate who wishes to obtain the "L. S. A." qualification is to register himself as a medical student. This, as previously explained,

he must do by sending his name, with certificates of the examinations he has passed, to the Registrar of the General Medical Council, 299, Oxford Street, London, W. If the certificates are approved his name will be entered on the register at once; if otherwise, the candidate must undergo an examination in Arts at one of the recognised examining Boards, such as that of the Society of Apothecaries itself, or that of the College of Preceptors, Queen's Square, London.

Having registered as a medical student, the next step is to apply to the Secretary of the Society of Apothecaries, Blackfriars, London, for a form of request for admission to examination. The particulars required to be given are:

Name in full—Address—Son of —Date of birth—Testimonial of moral character by —Date of registration as medical student—When lectures commenced—School of Medicine—Examinations passed. If the answer to each of these particulars is deemed satisfactory the candidate is admitted to the Final Examination at once, and is exempted from the written part of the Final. He is examined orally, and if he gives satisfaction the qualification is conferred on him forthwith.

The cases of graduates of colonial and foreign colleges and universities are considered on their respective merits. Graduates of Michigan are not required to undergo further study for admission to examination for L. S. A. London; and being exempt from the Primary, are eligible for the Final Examination.

The subjects of the Final Examination are the following: Part I.—Principles and Practice of Surgery; Surgical Anatomy and Pathology; Instruments and Appliances; a Clinical Examination of one or more Surgical Cases. Part II.—Principles and Practice of Medicine, including Therapeutics; a Clinical Examination of one or more Medical Cases; Pathology and Morbid Histology; Principles and Practice of Midwifery; Obstetric Instruments and Appliances; Diseases peculiar to Women and Children and their Pathology; Forensic Medicine, Toxicology, and Hygiene; Psychological Medicine.

The fee for examination is six guineas, which must be deposited at the office of the "Bedell," with the necessary certificates, at least seven days before the examination is to take place. The Primary Examination is held on the first Wednesday and Thursday of every month. The Final is divided into two parts. Part I is held on the second and fourth Wednesdays and Thursdays of every month, and Part II. on every Wednesday and Thursday.

The following particulars may also be noted. Qualified candidates are required to produce their diplomas. No candidate can be entered for examination, whether Primary or Final, until all the certificates are forwarded and found correct. In the event of a failure, a candidate cannot be readmitted to examination before the expiration of three months after the Primary Examination and Part I. of the Final Examination respectively, and of six months after Part II. The fee is retained, but no extra fee is required on re-examination.

The advantages of the L. S. A. to foreign graduates are chiefly these. It is a qualification which gives the possessor the legal status of a qualified practitioner, and enables him to register and practise as such in the United Kingdom. The examination being held very frequently, the candidate has not to wait any length of time before submitting himself for examination. The qualification does not rank high in an ornamental sense; and for those who simply wish to possess an English qualification, and not to practise in this country, some of the other degrees and licences are more to be recommended. But for those who possess high foreign degrees already, and who simply wish to obtain the status of an English doctor, the L. S. A. is as good as any, and more easily obtained than most.

# NOTES.

### THE BRUSSELS INTERNATIONAL CONVENTION.

The meeting has been fixed for Tuesday, Wednesday, and Thursday, the 3rd, 4th, and 5th of August. The Belgian committee formed to carry out the resolution of the London Congress of 1881 having found themselves unequal to the task, the work has devolved upon the permanent secretary, Dr. Hughes. All who have papers ready should send them at once to Dr. Hughes, and those who have not got them ready should prepare them without delay. There will be some little expense connected with the arrangements, and Dr. Dudgeon, having consented to act as treasurer, will be happy to receive subscriptions towards the same. Let all who intend to be present send their names to Dr. Dudgeon at once; and those who cannot by any possibility go can testify their good intentions by sending a subscription.

### THE BAZAAR.

THE bazaar in aid of the fund for opening the new Bayes Ward at the London Homoeopathic Hospital will be held on the 4th and 5th of June. We trust that our readers will do all in their power to help to make the affair successful. Those who have not been able to add to the store of articles for sale will be able to assist by their presence. We understand that the wards of the Hospital will be open for inspection by visitors to the bazaar between the hours of two and four in the afternoon.

# CURE OF HYDROPHOBIA BY SWEATING.

We publish elsewhere an article by Mr. Richard Metcalfe on the case of J. W. Mitchell, who was bitten by a mad dog at Bradford in March last, and treated by Turkish baths in London under Mr. Metcalfe's care. We had an opportunity of seeing Mitchell, and can testify to the accuracy of Mr. Metcalfe's report of the case, which, we have no doubt, will be found very interesting by our readers. In addition to the case of cure mentioned in our last number, a still more striking one comes from Russia. The Russki Courrier, quoted in the Daily News, gives the particulars:—

"A boy was bitten by a rabid dog on April 8th. On the 25th he showed signs of the disease, being unable to swallow liquids, the sight of which induced paroxysms. He was at once removed to the hospital and placed by the doctors in a sweating-bath, the temperature of the water being gradually raised to 42 deg. Réaumur (126.5 deg. Fahr.). At this stage the boy became unconscious for an hour. He was taken from the bath, quickly swathed in cloths, and placed in a room having a constant temperature of 20 deg. Réaumur (77 deg. Fahr.). The same process was repeated in the evening, and twice a day for the following four days, when the patient's appetite was fully restored. The boy has now been dismissed from the hospital in his usual health, and is declared by the faculty to be entirely and thoroughly cured."

Samuel Thompson, the American farmer, who founded what is now known as the Eclectic School of medicine, and whose principal curative measures were the vapour-bath, lobelia, and cayenne pepper, claims to have cured rabies in dogs and hydrophobia in man by a mixture containing lobelia, cayenne pepper, and valerian.

### PRIZE ESSAY ON HYDROPHOBIA AND ITS TREATMENT.

Some time ago a prize of thirty guineas was offered by Dr. Prater—a veteran practitioner of medicine, though a recent convert to homeopathy, since deceased—for the best essay on hydrophobia and its homeopathic treatment. When first advertised the response was only a single essay, which was not deemed by the judges of sufficient merit to deserve the prize. A second advertisement was more successful. Two essays of very great merit were sent in, and the prize has been awarded to Dr. J. D. Hayward, of Liverpool. The second essay, however, by Dr. George Scriven, of Dublin, so nearly approached the first that the judges (Drs. Hughes, Pope, and Dyce Brown) did not find it a very easy matter to decide between them.

## THE CASE OF A DOG.

An esteemed correspondent sends us an interesting item of clinical experience from Malta. He is the owner of a large retriever dog, six years old. This dog had chronic diarrhees from a puppy, and skin disease when young. After teething he had bad ears, from which most dogs of the retriever kind die in Malta, the climate being too hot for them. After that he had epileptic fits. Under the care of his master—an amateur homoeopathist—there being, unfortunately, no pro-

fessional homoeopathist in the island, and not much scope for one—he recovered completely, and is now in splendid condition. For the fits he received a solution of Sulphate of Copper, 1-10,000, two or three drops on a bit of cracknel biscuit three times a day. The only cause that could be assigned for the fits was suppressed eruption. He used to have them two or three in succession. Under the Copper they ceased; and when, after a few months, they again appeared, the action of the Copper was equally prompt, and they have never since returned.

### THE MOST POPULAR MEDICINES.

THE Chemist and Druggist has published an analysis of 10,000 allopathic prescriptions. From this it would appear that routine still dominates the prescribing of the old school. The six most frequently prescribed drugs are the following:-Spiritus chloroformi, 853 times; potassii bromidum, 717; vinum ipecacuanhæ, 696; spiritus ammoniæ aromaticus, 566; quinæ sulphas, 563; sodæ bicarbonas, 555. After these come ammonii carbonas, liquor ammoniæ acetatis, glyceinum, syrupus aurantii, potassii bicarbonas, and spiritus ætheris nitrosi. Tincture of aconite was prescribed 157 times, Fleming's tincture of aconite 5 times, arnica 6 times, caullophyllum 1, cimicifuga 19, gelsemium 56, ignitia 1, nux vomica 468, hydrastis 2, extract. hydrast. liquid. 2, hydrast. Can. pulverat. 1, phosphorus 13, hamamelis 13, hamameline 1, hazeline 15, and pulsatilla 6 times, which shows that the lead of the Bruntons and Ringers is being pretty extensively, if timidly, followed. At the next meeting of the British Medical Association a report on the value of Hamamelis will be made to the section of Therapeutics. The subject is at present receiving attention from the Collective Investigation Committee. We wonder if the Committee will "investigate" Dr. Hughes's Pharmacodunamics?

# DELIRIUM TREMENS CAUSED BY BATING TEA.

DR.W. B. SLAYTER, of Halifax, Nova Scotia, reports a case in which well-marked symptoms of delirium tremens were brought on in a young woman by chewing tea. The girl stated that she commenced the habit when she went to work in a factory at the age of seventeen. She said it was a very

common habit, and she would chew on an average half a pound a day. It made her feel better able to work. She tried to give it up, but felt so nervous and fidgety as to be compelled to return to the old habit. On November 10th, 1879, she was found wandering about the house imagining evil spirits and people were seeking to do her harm. was sleepless and had repeated twitchings of the muscles of the face and extremities. Three days after, she was found wandering about the wharves of the city, and she tried to drown herself. There was no marked rise of temperature. but there was violent delirium and tremulous movement of hands and arms. A hard tumour in the right iliac region was dispersed by a brisk purge, which brought away a thickish tarry-looking matter, consisting of tea-leaves in various stages of maceration. In October, 1885, she had another attack from the same cause. Dr. Hughes Bennett's Physiological Committee, which came to so many decisions that have since been upset, concluded that the motor nerves were unaffected by tea. Dr. Bennett operated on dogs. Dr. Slayter's case the most characteristic symptom was repeated and continuous muscular twitchings.

## SALICYLIC ACID AND SALICYLIC ACID.

There are two kinds of salicylic acid, one obtained from the vegetable kingdom and one obtained from carbolic acid. According to Dr. Latham (Brit. Med. Jour, p. 730), the latter is to be avoided, as it is liable to produce symptoms closely resembling delirium tremens. Dr. Latham states that the acid should be given free and not combined with any base.

## THE HOMOSOPATHIC LEAGUE—A GENEROUS OFFER.

THE Rev. Canon Fergie, in addition to an annual subscription to the funds of the League, has offered to give £5 to start a "Publishing Fund," provided forty-nine others can be induced to give a like sum before the close of the present year. We have no doubt this excellent lead will be worthily followed; and we shall be happy to announce further promises in our pages. A sum of £250 would form an excellent basis for the operations of the League.

# ORIGINAL COMMUNICATIONS.

# CHRONIC DIARRHŒA-SULPHITE OF SODA.

By CLARENCE BARTLETT, M.D., Phila., U.S.A.

Mrs. —, æt. fifty years, had suffered from diarrhæa for two years when she came under treatment in March, 1884. The stools numbered five or six daily, and were accompanied by a sickening pain in the epigastrium, and also with some tenesmus and cold sweat. She had pain about the right shoulder-blade, which she sometimes compared to the sensation as if the part was bathed in cold water. The stools were watery, and looked very much like yeast. She was very much debilitated. The taking of food or drink provoked a stool. The tongue was very pale and took the imprint of the teeth. The patient's complexion was of a very peculiar The face generally was a whitish waxy colour, character. with the exception of the cheeks, which were of a "light freckle colour." Arsenic, Phosphorus, China, Sulphur, and Mercurius corrosious were each tried in turn, but with little effect. Every dietary precaution was also adopted. Finally, after two months of this treatment, the Sulphite of Soda in the third decimal trituration was prescribed, at the suggestion of the late Dr. Farrington, on account of the appearance of the tongue and the yeasty character of the stools. This was on the 1st of June, 1884; by the 1st of July she had but one stool a day. She then abandoned treatment. She had no further trouble with her bowels until the summer of 1885, when the diarrhoea returned. This time it was controlled by Mercurius solubilis, the stools not having the character which before led to the selection of the Sulphite of Soda.

# PREVENTION AND CURE OF HYDROPHOBIA BY SWEATING.

REPORT OF THE CASE OF J. W. MITCHELL, BEING ONE OF THE TWELVE BITTEN BY A MAD DOG AT BRADFORD; WITH COMMENTS ON PASTEUR'S INOCULATIONS AND BUISSON'S SWEATING CURE,

By RICHARD METCALFE.

In March last twelve persons were bitten by a rabid dog at Bradford, and one (named Ashworth) died. Nine went to Paris to be under M. Pasteur's care, and one, John William Mitchell, painter, 47, Kingswood Street, Great Horton, Bradford, came up to town to be treated by Dr. Buisson's method.

In giving the following report it will be necessary that I should state the particulars of Ashworth's case to prove that

one dog bit the two men.

On his arrival, 16th March, 1886, the following examination was made: -Age 22, light complexion, auburn hair. rather delicately organised, nervous temperament, intelligent, though not robust yet enjoys fair average health, organs of the viscera healthy, with an average pulse though lacking tone, and the temperature of the body normal. Mitchell's statement :—" On Sunday, the 24th January last, I left home at a quarter-past five in the afternoon to go to chapel. When about 100 yards down the street I met three dogs. I continued my journey, when one of the dogs turned back and bit me on the calf of the leg, seizing me twice but only biting once. Its teeth went right through the trowsers into the flesh, grazing the skin, and tore the trowsers in two I met several young ladies who had been attacked, and whose dresses were torn by the dog. The animal, after biting me, ran straight down Great Horton Road and met The dog seized him by the middle fingers and swung there. I ran to a druggist, who put some salve upon the wound. I continued under his treatment for a week. On the Wednesday following I went to the Town Hall to report my case and to see the dog which had bitten Ashworth, but it had been destroyed. From the description I gave, the authorities said it was the same dog which had bitten me. Ashworth went to work as usual on the Monday with his fingers wrapped up. The following Wednesday he went to Colne, in Lancashire, to a celebrated man who professed to cure hydrophobia, where he stayed two days and had his wounds cauterised for the first time. He took the medicine recommended and returned home on the Friday or Saturday. Ashworth resumed his work as usual on Monday, February 1st, and continued well until the 8th March, which was on a Monday. He returned home after breakfast, remarking to his sister that he was done for. Dr. Sinclair was sent for. who at once said he was suffering from hydrophobia. doctor came the following day, and in the meantime two or three other doctors saw the patient, all agreeing it was hydrophobia. On Wednesday, the 10th, he was removed to the workhouse in a sack, sewn up, with his head out.

chloroform was administered to keep him unconscious until he arrived there. Ashworth died on the following Friday. inquest was held on the body, and a verdict was returned to the effect that he died from hydrophobia. The authorities made a public announcement asking all those who had been bitten on or about the 24th of January to call at the Town Hall, intimating that the sufferers would be sent to Paris to be under M. Pasteur's treatment. Mr. Bryan attended at the Town Hall, requesting that some cases might be brought to London to undergo Dr. Buisson's After a consultation, Dr. Lodge, the police surgeon, consented to my coming to London on condition that I saw Sir James Paget, which Mr. Bryan agreed to, but Sir James refused to give any opinion further than to say that he did not think I should have hydrophobia."

THE TREATMENT.—The treatment to which Mitchell was subjected for sixteen days was as follows:—Turkish bath three times a day, entering the bath at a temperature of 130 degrees, for ten to fifteen minutes, and then passing into a hot-room ranging from 170 to 180 degrees, allowing him to pass in and out of these rooms as might be most agreeable. One bath was taken before breakfast for forty minutes, another between ten and eleven, and a third at five o'clock in the afternoon for one hour. He was occasionally shampooed, and soap-washed twice a week. The temperature of the ablution following the sweating bath ranged from 70 to 75 degrees. Diet full and generous. Took exercise daily for four or five hours, amusing himself with sight-seeing as the weather

permitted.

GENERAL REMARKS.—The effect of the treatment upon the body has been to improve the patient all round. Previously to his coming he had passed restless nights, but his sleep is now greatly improved. After being under treatment for about ten days he experienced a considerable amount of pain in the leg which had been bitten, but whether this was attributable to muscular pain or the bite it is difficult definitely to say, but my impression is that the pains were muscular, he having walked a good deal more than usual since he came to London. The leg was well manipulated for two or three days, when the pain subsided; and on the day he returned home (April 5) he felt better than he had done for a year, and was without ache or pain. The young man remained in town for three weeks to finish his sight-seeing and simply took a bath daily. Mitchell and Ashworth lived

near to each other at Bradford and were intimate. be seen that the dog first bit Mitchell and then his friend in a few minutes afterwards. Ashworth having died of rabies and not having been bitten by any other dog, there cannot be much doubt but that it was the result of the bite he received on the day Mitchell was bitten. As to whether there was sufficient ground for alarm in Mitchell's case, I am not in a position to say, beyond stating the fact that I believe cases of hydrophobia have occurred where no greater abrasion was inflicted on the skin. As far as I have been able to ascertain, 80 per cent. of the patients who have been to Paris to be inoculated are somewhat analogous cases to Mitchell's; anyhow, all the Bradford cases were, with the exception of one child who was bitten in the face. And there is considerable doubt as to whether all the cases were bitten by a rabid dog; but with regard to Mitchell there can be no doubt.

As to the evidence of the curative or preventive means by deduction (or sweating), we have an account of the successes of the late Dr. Buisson, and other medical men, which have

never been authoritatively disputed.

Inoculation treatment, as pursued by M. Pasteur, is merely a matter of conjecture; in fact he does not profess to cure rabies, but only to prevent its development, provided the case comes to him within fourteen days. Dr Buisson's chief success was amongst cases where decided symptoms of hydrophobia had set in, his own case to wit; hence it is a system of fact and not of conjecture.

Pasteur's method is the introduction of a virus, while Buisson's is the deduction of a virus—cleansing, depurating, by heat acting on the body; the blood is thus purified as

water is by charcoal.

THEORY OF THE ACTION OF HEAT.—Heat at 200 or 300 degrees is supposed to destroy any contagious virus inside the body, or even contagious germs in rooms or clothing

when exposed long enough to the heated atmosphere.

Heat augments the waste, and demand for food is created to replace the waste with fresh material, and thus the blood and tissues are renewed. So convinced am I of the effects of heat on animal life, that it is my belief that had Ashworth been judiciously subjected to hot air at once, when Dr. Sinclair saw him on the Monday, the man would now have been living, and I trust that before long this statement will

be put to the test by some medical man bringing a case to me with symptoms of hydrophobia developed.

RESPONSIBILITIES OF INOCULATION,—Assuming that large percentage of persons who go to Pasteur may have been bitten, though not by a rabid dog (or if bitten by a rabid animal, yet have received no injury from the absorption of virus into their circulation),-Who is to be responsible for the consequences that might occur from inoculating these individuals with the supposed attenuated mad-dog virus? Are the authorities who sent them? If so, I am afraid that they are taking upon themselves very grave legal responsibilities. It is perfectly certain that every case must receive a certain amount of virus into the system (i.e., if the patient is inoculated according to M. Pasteur's published methods), and that of the most pungent kind, which must necessarily have an injurious influence on the body. Buisson's method is free from any possible objections; the patient does not only have his blood depurated, but the very tissue of his blood is improved all round. It will be generally admitted that it is very repulsive to one's feelings to have infused into one's blood a virus first taken from a rabid dog, then passed through a monkey, and afterwards a rabbit, all the animals having suffered more or less from the effects of rabies. and all of which possess very different organisms from human beings.

THE "VACCINE."—The spinal cord of the last-named animal (the rabbit) is extracted, and put through certain drug preparations, and after being dried it is pounded and mixed with veal broth, and injected into the body at various strengths. This is the remedy with which M. Pasteur endeavours to meet the most difficult of the complaints we have to combat. The encouragement his system has met with may be gathered from the fact that patients are being sent to him from all parts of the world. And he has aroused sufficient interest to bring him in a large fund for building a huge hospital. It is surprising that there should be people foolish enough to countenance such a system, much less to submit to such an inhuman, disgusting, and unclean method.

It has been said that heat is of no use in this disease. Why in the world do medical men display such apathy upon the question?—in not testing the utility of the sweating cure, and thus settle the matter once and for all

time? There can beno difficulty, seeing that nearly every large town in Europe has its hot-air bath and means provided.

Why not ornament our hospitals with every conceivable

sweating appliance?

There are a number of ladies and gentlemen who have no schism to protect or advocate, nor do they interdict any rational means of known efficacy taken in conjunction with the sweating process, their only motives being the general interest and welfare of their fellow-creatures. They have interested themselves, because they believe that Buisson's method is effectual, and more rational than that of Pasteur's. These philanthropists are ready to defray the cost of any effectual experiment of the system in the treatment of rabies. Advertisements have been inserted in different papers for months past to that effect. Why medical men have not availed themselves of this opportunity is best known to themselves. Dum spiro spero.

It must not be supposed that in commending the sweating cure in the treatment of hydrophobia I wish to ride the hobby to death, or ignore other remedies. I say, use your cauterisation, carbolic acid, suction, cupping, bleeding and medicine, in fact anything which experience and common sense dictate and have proved useful; but I do protest against the introduction into the blood of Pasteur's preparation of "vaccine" in view of counteracting the viru-

lence of another, thus making bad worse.1

Hydropathic Establishment, Priessnitz House, Paddington Green, London, May 17th, 1886.

# BRIEF CLINICAL NOTE.

By Dr. HARMAR SMITH.

ANASARCA IN A VERY OLD LADY RAPIDLY CURED BY APOCYNUM CANNABINUM AFTER THE FAILURE OF OTHER REMEDIES.

NOVEMBER 30th, 1885.—Mrs. C., Broadstairs, æt. eightyfour. I found her suffering from great anasarca of thighs, legs, and feet, which pit on pressure very decidedly. Urine scanty, alkaline but not albuminous. Great irritation of the skin of inferior extremities, and papular eruption.

The co-existence of the eruption with the dropsy led me

<sup>1</sup> Since this article was in type we have seen a letter from Mitchell, in which he says that he is still enjoying excellent health.

to begin the treatment by Apis Mellifica 6x, a drop every four hours.

December 2nd.—Continues much the same. There are no symptoms of organic disease, either of the heart, liver, or kidneys. Continue Apis.

8th.—No change in symptoms; is aleeping well. Con-

tinue the medicine.

15th.—Increase of anasarca with pain in legs; also great irritation of skin; urine scanty; sleeping badly. Continue Apis and alternate it with Arsenicum 2x, a drop three times a day.

18th.—Further increase of the anasarca. Omit Apis, continue Arsenicum, and take Digitalis , gtt. ij. twice a day.

22nd.—Much the same. Continue medicines.

24th.—An attack of Menière's disease, to which she is subject; great vertigo with vomiting and fever. Take Aconite and Ipecacuanha in alternation. Omit other medicines.

25th.—No return of sickness or vertigo; slept well, and has taken her usual diet, showing that there was no primary gustric affection, but only a recurrence of the Menière's disease; fever gone. To take Mercurius and Ipocac,

29th.—Increase of the anasarca. Is passing only about a pint of dark-coloured alkaline urine, not albuminous. No other symptoms. To omit all other medicines and take Αροςγημέ Cannabinum φ, one drop four times a day.

31st.—Great increase in quantity of urine since beginning to take the Apocynum; has passed two quarts in two days.

January 2nd.—Passed three quarts of urine in fifty-four-hours.

5th.—A slight diminution in the quantity of urine, which is still alkaline; but refuses to take the *Apocynum* because she fancies it brings on her attacks of aural vertigo.

7th.—Has taken a diminished dose of the Apocynum, and the flow of urine has increased. Great diminution in the

anssarcous swelling.

9th.—Much better in all respects. Two quarts of urine in two days. Further lessening of the dropsy, and no return of the vertigo. Apocynum, one-third of a drop three times a day.

15th.—Anasarca nearly gone. Passed 51 pints of urine

in seventy-six hours. Continue Apocynum.

29th.—Discharged cured.

I called some weeks after this to bid her farewell, when

she was perfectly well, only complaining of the infirmities

of old age.

It may perhaps be as well to add that the case of dropsy narrated in some previous papers, and which was cured by Apis, is not that of the same old lady, though also resident at Broadstairs. Miss A. has had no recurrence of the disease. Spring Bank, Malvern, May 12th, 1886.

# SOCIETY'S MEETING.

### BRITISH HOMEOPATHIC SOCIETY.

THE Eighth Ordinary Meeting was held on Thursday, May

6th, 1886, Dr. Roth, Vice-President, in the chair.

Dr. Roth mentioned a case of Lithotrity. The patient, aged sixty-eight, passed a few small calculi two years ago. To prevent further formation he took lithia water. A few weeks ago he found himself unable to retain his water, and on the advice of Dr. Dudgeon consulted Mr. Buxton Browne, who found a stone, 1 inch by ½ inch, and crushed it. Neither fever, nor cystitis, nor any other bad symptom occurred, and the patient was permitted to leave his bed after five days. The stone was uric acid. The patient was put on a particular regimen; no alcohol, sugar, fat, tea, or coffee were to be taken; no fruit except apples and tomatoes; no butcher's meat, and no milk, except a little with cocoa (made from the nibs); eggs were allowed, and bread with a very little butter. What surprised Dr. Roth most was the forbidding of milk.

Dr. Hilbers showed two specimens; one, the traches and large bronchi with false membrane taken from a child who died of diphtheria; and another, a tumour excised from a breast.

Dr. MATHESON then read his paper on Displacements of the

Uterus and the Use of Pessaries.

Dr. Matheson said there was no subject on which there was so much difference of opinion among doctors. He complained that medical education was defective in respect to this department, students receiving very little special instruction. The nature of the affections to be dealt with were very various, and the treatment having to be carried out to a great extent in the dark, it required considerable manipulative skill. Some authorities discountenanced the use of pessaries altogether and counselled lying up. Dr. Matheson did not agree with these. Many patients were not able to lie up.

Dr. Matheson pointed out that it is not every case that a pessary alone will cure. When there is congestion or adhesions other measures must be adopted. To use pessaries with good

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effect a man must be a master in the art of adjusting them. The right pessary cannot be discovered without the skilful use of the sound. The best pessaries in ordinary cases will be found to be Albert Smith's modification of Hodge, Meadow's pessary,

and the ring pessary.

Dr. Matheson related several cases in which these pessaries had been used with excellent effect. When there was much irritation and inflammation of the parts the application of the instrument had to be delayed until these had been removed by rest and internal treatment. Bellad. 1x, Verat.-Virid. 1x, Gels. 1x he found very effective in reducing inflammation. In one-case where there was great debility, Nux V. 3, Maltine, and Parrish's Food were given.

Dr. DYCE Brown agreed with Dr. Matheson that pessaries were of extreme value, acting just like splints to fractured limbs. The internal use of *Arnica* was of great help. Many cases of retroversion are the result of previous congestion of the uterus, and in these cases the central point is to cure the inflammatory state; but the use of the pessary is of material help towards cure. The most important internal remedies are *Bell.*, *Sulph.*, *Sopia*, and *Calcarea*. Dr. Brown condemned the use of

the stem pessary.

Dr. CLARKE suggested the impossibility of the ordinary student becoming in his four years' course an accomplished specialist in every department. He doubted the advisability of general practitioners meddling much with cases of the kind unless they had given some special study to the subject. He thought Dr. Matheson's paper a very useful and practical one.

Dr. EDWARD BLAKE said that it does not much matter where the uterus is so long as it is not hyperæmic. The uterus is always on the brink of hyperæmia during a long period of the lives of women. Displacements proceed often from violence, but there is often a preliminary stage of hyperæmia. Dr. Blake has almost abandoned the use of hard pessaries; but for flexions the stem was necessary. He used cotton wool and animal wool now, which has the advantage that the patient can introduce it herself. He recommended a modification of Hodge for retroversions, stem for flexions, and Nux Vomica for the congestion of anteversions. He maintained that it was necessary to pay attention to the general condition of the patient. A case was mentioned in which there was uterine suffering when the uterus was quite healthy, though a little prolapsed, connected with an old pleurisy at the base of the left lung and a cough of two years' standing. She was kept in bed; Acon. 1x and afterwards Hepar 3x were given, and poultices applied. The pleurisy got well; the uterus was packed with animal wool, and under Secale it got well. The patient was strumous, and had a skin affection afterwards. Dr. Blake thought that in Dr. Matheson's cases the pessaries Digitized by GOOGIC

were left in too long. Stems should not be left in over four

days, or any other pessaries over one month.

Dr. Roth, in the chair, was surprised that no mention had been made of the treatment of displacements by movements on the Swedish plan. Many cases had been cured on the system of Brandt. Dr. Roth regretted that none of the speakers had tried it.

Dr. Matheson, in reply, said he had little answer to make, as the paper had been so well treated. He did not think that Dr. Blake's case militated against the use of pessaries. The cough was clearly the cause of displacement. There are two classes of cases—those that caused symptoms and those that caused none. The latter he let alone. With regard to the stem, Dr. Dyce Brown and Dr. Blake objected to this; but results must decide the question. In the case he had mentioned it did cause some irritation, but it practically cured the patient. Dr. Matheson had carefully considered the Brandt treatment, and had come to the conclusion that it was not generally practicable. It was too-costly and too difficult.

# LEAGUE INTELLIGENCE.

### TRACT NO. 1.

The first tract of the League is already in the press and will be in the hands of subscribers within a few days. It answers the question "Why should the friends of Homocopathy form a League?" It is an eight-page pamphlet, and is divided into a number of paragraphs with sub-headings. Other tracts are ready for the press.

## CARDS AND RECEIPT BOOKS.

About fifty gentlemen in different parts of the country haveundertaken the duties of local honorary secretaries, and they have been provided with a card stating the objects and rules of the League, and a receipt book with authority to receive and acknowledge subscriptions.

### RETURNS.

The Hon. Secretary requests that the local hon. secretaries. will send on to him once a month a list of the names they have obtained, with addresses, and the amount of their subscriptions in order that he may report to the Committee the progress of the movement, and have the literature of the League forwarded to those who have joined.

### WORK FOR THE LEAGUE.

THE following account, from the Sydenham and Penge Gazette of May 8th, of an inquest lately held at Sydenham will be read with great interest by our readers. We must leave them to judge why Dr. Roberts withheld the certificate, and also to explain how he reconciles his belief that the patient was poisoned by arsenic with his opinion that no one was to blame. The fact that Dr. Scott, the allopathist, made no alteration in the prescription of Dr. Fleury, the homosopathist, is as noteworthy as the complete ignorance of Dr. Roberts regarding the action of the drug; and the general want of knowledge of what homeopathy is which was manifested throughout the proceedings shows how much scope and how much need there is for the educational work of the League. We think the friends of the deceased are much to be pitied for the needless annoyance caused by the action of Dr. Roberts; and we think that the salutary rebuke given to the latter by the verdict of the jury will have a wholesome effect. The case should be a warning to those believers in homosopathy who so lightly betake themselves to narrowminded and ignorant allopaths. The medicine was, of course, Iodide of Arsenic, but we print it as it appears in the report, "Iodyne" of arsenic:-

### INQUEST ON A LADY AT SYDENHAM.

#### ALLOPATHY V. HOMOSOPATHY.

An inquest was held at the Greyhound Hotel, Sydenham, before Mr. Carttar, coroner, on Saturday last, on the body of Margaret Ruth Mackenzie, daughter of Mr. James Mackenzie, of Derwent Villa, Silverdale, Sydenham.

Mr. Blackmore was chosen foreman of the jury.

Mr. James Mackenzie, who described himself as a retired officer of the Indian Civil Service, deposed that the deceased was his daughter. On the 5th of March last she was thirty-one years of age, and had been an invalid since September, 1883. At that time she crossed London Bridge on a very hot day with very light garments on. She was detained, and came home late, when she said she had taken a chill and felt very ill. She took fever, and the next morning she saw Dr. Fleury, of St. Swithin's Lane, a homocopathist, who had been attending witness's family since 1872. Deceased got over this illness to a certain extent, but it left her very feehle. In July or August, 1885, she went to Worthing, and there caught a chill whilst bathing in the sea. That developed into fever, and some affection of the bronchial tubes. She returned, however, about the middle of August, and saw Dr. Fleury. Dr. Bird and Dr. Brigham, of Sydenham, also both attended the deceased, off and on, for some months, the last visit of Dr. Brigham being at the end of January last. He said she was suffering from malarious fever and bronchitis, but he thought she was somewhat better. After taking some medicine, deceased decided upon going to Dr. Fleury again, and she called upon him with her sister on the 26th of March last. After examining Digitized by GOOQIC

her carefully, Dr. Fleury ordered her down to Bournemouth, and shewent there. Finding the accounts of her health unsatisfactory, witness went down to Bournemouth to her on Thursday, the 22nd. ultimo. Dr. Scott, an allopathist, had there been attending deceased. Witness saw Dr. Scott and asked him to tell him the truth about his. daughter. Dr. Scott said, "She can't be worse." Witness asked, "Can I, with safety, take her back to her own home to her mother?" Dr. Scott said he might, and added that he had attended her frequently, and that she did not get any better and was in a most-dangerous state. Witness asked the doctor on Good Friday, if he took her back whether there was any danger of her dying on theway. Dr. Scott said he did not think so, but that she had not many days to live. Witness brought her home on the next day (Saturday), and she elected to be attended by Dr. Roberts. At his request, Dr. Roberts saw her on Sunday, and said, "Your daughter is dangerously ill. She wants vital energy, and you must feed her up." Witness. saked, "Will you examine my child?" and he replied, "No, I can-not, she is too far gone." Dr. Roberts came again on Monday and Tuesday. On Monday he said, "I think there is a little change for the better, but I adhere to my original opinion that she cannot live. Send for me should you require me." On Wednesday morning, at 1.30, deceased became very much worse. The family were all standing round the bed when she died. They sent for Dr. Roberts, and when he came she was dead. Witness attributed death to lung-disease and bronchitis, but his daughter had a most happy peaceful death without a struggle.

By the Coroner: He was sometimes treated homocopathically, and he believed in it. He had not seen Dr. Roberts since the death of the deceased. He had written to him for a medical certificate, but had received no answer, and no member of his family had, as far as he knew, had any communication with Dr. Roberts. Dr. Roberts seemed very kind and sympathetic, and he had no fault to find with his treatment. Witness had had five doctors for his daughter. He did not know that the deceased had taken anything except what the

doctor had prescribed for her.

Miss Mary Stewart Mackenzie, sister of the deceased, deposed that the deceased had been ailing for a long time, suffering from a failing of strength and fever. Dr. Scott, at Bournemouth, said her lungs were affected, and also that she was suffering from an acute attack of bronchitis. Witness usually gave her her medicine at Bournemouth. On her return Dr. Roberts gave deceased a powder, and some medicine for her cough. She had not heard Dr. Roberts say what deceased died from. Deceased went to Bournemouth, on the adviceof a homocopathist, and was attended at Bournemouth by Dr. Scott, an allopathist. Dr. Fleury prescribed iodyne of arsenic powders before they went to Bournemouth, and witness gave the medicine prescribed. Dr. Scott continued the same prescription when he was called in. She produced the prescriptions of both doctors. Dr. Scott ordered decreasing doses of the same powder. When Dr. Roberts was called in she told him her sister was taking iodyne of arsenic, and he said, "I wonder what they are giving that for!" The Coroner: Did he say if he approved of it or otherwise?

Witness: No, I don't think he said so, but I was under the impression that he did not approve of it. He told me not to give her

any more of the powders. I obeyed his orders, and gave her no more.

By the Foreman: Dr. Scott gave no hopes of her recovery.

Sergeant Bowtell, stationed at Sydenham, deposed that on the previous day he received instructions from the coroner to make inquiries. He saw Dr. Roberts, who told him that the outward appearance of the deceased showed symptoms of chronic poisoning from arsenic. He also saw the parents of the deceased, who said she had been suffering from consumption for some time, and that she had been attended by several doctors. He saw Dr. Brigham, of West Hill, and Dr. Fleury, of St. Swithin's Lane. Dr. Fleury said when he last saw the deceased she was suffering from congestion of the lungs, and Dr. Brigham was of the same opinion. Both doctors said it was a very bad case, and that they were not surprised to hear of her death at any moment.

Dr. Roberts, of 9, Sydenham Park, deposed that he was called to visit the deceased on Sunday, the 25th ult. He saw at a glance that the patient was in a dying condition, and he gave his opinion as such. He asked what the deceased had been taking, and he was told iodyne of arsenic. The symptoms were consistent with arsenical poisoning. It was impossible to make a proper examination of the chest, but it was easy to discover that both her lungs were involved. As she was in a sinking state he gave her a slightly stimulating draught, and a mild sleeping draught which gave her three hours' rest. He saw the deceased again on Tuesday, but when he was

again called she was dead.

The Coroner: Do you attribute death to arsenical poisoning?

Witness: It is difficult to say.

The Coroner: But that is what your statement implies. What certificate would you have given?

Witness: I should have given a certificate that she died from pulmonary disease attended by symptoms of arsenical poisoning.

The Coroner: Did you know why arsenic was given?

Witness: I know it is a remedy homoeopathists use largely. The Coroner: Well, do you approve of it?

Witness: Most certainly not in this case.

The Coroner: Do homoeopathists prescribe it for affections of the lungs.

Witness: I don't know except by report.

In answer to further questions,

Witness said arsenic was a valuable medicine in some cases, but he was not aware of its being used for pulmonary diseases. He sometimes prescribed it in small quantities.

The Coroner: If the deceased had been suffering from anything besides pulmonary disease it might have been right to prescribe

mracino :

Witness: Undoubtedly. It is chiefly given in cases of malaria

and ague.

A prescription was here handed to witness, and the Coroner asked him whether the arsenic therein ordered would be sufficient to cause death, to which the witness replied that he should say not, but still it would produce the symptoms of arsenical poisoning that he had witnessed. The Coroner: Do you think that a right prescription to have given in this case?

Witness: I should not myself have given it; that is all I can say.

The Coroner: Do you approve of homosopathy?

Witness: I don't like to offer an opinion. I have a perfect horror of these things. These men are entitled to practise as they think best; the evil lies in the fact that people practise who know nothing whatever about medicine; they obtain these things and distribute them broadcast.

In answer to further questions witness said he thought the medicine in this case was given in good faith. He did not blame anybody, but the abnormal symptoms which he noticed led him to make inquiry.

The Coroner: Do you think deceased was in a fit state to be

removed from Bournemouth?

Witness: Certainly not; I should have prohibited it.

Dr. Roberts further explained that it was not through any desire of his that this inquiry was held. He met Mr. Phillips, the registrar of deaths, and mentioned the case to him with the view of getting it registered, and Mr. Phillips communicated with the coroner. If he had given a certificate in the usual way he must have given it in such a form as would inevitably have led to an inquest.

The Coroner said by a recent order registrars were bound to communicate with the coroner of the district in such cases, and in this case it was reported to him that death was due to arsenical poisoning. Under these circumstances it was, of course, his duty to hold

an inquest.

Mr. Mackenzie, in answer to the Coroner, said he did not wish to ask Dr. Roberts any questions. He did not believe his daughter had been given too much arsenic. He did not think Dr. Roberts understood her case. It was a strange thing that Dr. Scott continued the same medicine that Dr. Fleury had ordered, if arsenic was not a proper remedy.

The jury, after a consultation, returned a verdict that death was due to pulmonary disease, or, in technical terms, "Natural Causes."

# FROM ABROAD.

(ABSTRACTS AND EXTRACTS.)

### AMERICA.

WE take the following from a report of the proceedings of the Massachusetts Legislature in the supplement to the Boston Herald of February 27, 1886:—

HOMOGOPATHS AND THE BOARD OF HEALTH.

The following was received and, on motion of Mr. Hosmer, of Concord, laid on the table to be printed:

To the Honourable the Senate and the House of the Representatives of Massachusetts:

The Massachusetts Homocopathic Medical Society, at a meeting

<sup>1</sup> A correspondence has followed in the Sydenham paper, but we must defer our notice of this till next month.—Ed. H. W.

held in Boston on February 11, 1885, unanimously voted that, in the event of the formation of a State Board of Health, distinct from and independent of the Board of Lunacy and Charity, as is now proposed, it is exceedingly desirable that the members of the new board be not appointed exclusively from the Massachusetts Medical Society. For, we believe, first, that a State Board of Health should not be made up entirely of physicians, and that its efficiency would be greater if a -certain proportion of its members should be drawn from other walks in life; and second, that the representation of the medical profession on the board should be a bond fide representation of the three branches of the profession indicated by the three societies specially chartered by the State, and not an ex-parte representation of any one school of medicine which may be antagonistic to the others. The Massachusetts Homeopathic Medical Society therefore respectfully represents that in its opinion it is extremely desirable that the medical representation on the State Board of Health should consist of at least one member from each of the three specially incorporated medical societies of the State, and that neither of these societies shall have more than two representatives thereon. And this society respectfully petitions that a provision to this effect shall be incorporated in the act to establish the proposed State Board of Health.

> CHARLES L. NICHOLS, President, N. W. EMERSON, Secretary of the Massachusetts Homeopathic Medical Society.

To the Honourable the Senate and House of Representatives of Massachusetts, in General Court assembled:

The Massachusetts Homcopathic Medical Society begs to present to your honourable body the following memorial: This society was incorporated by the State of Massachusetts in 1856, thirty years ago. It holds at the present time a membership of 230 duly educated and honourable physicians located in different parts of the State, and it represents the medical opinions and practice of several hundred other physicians and many thousands of citizens and tax-payers of this State. The members of this society feel a deep interest in all matters pertaining to the general health and well-being of the community, and have watched with interest the action of the Massachusetts Medical Society, which in June last passed resolutions recommending the reestablishment of a separate State Board of Health, and appointed a committee in furtherance of this object, consisting of Drs. George B. Shattuck of Boston, John M. Harlow of Woburn, Richard L. Hodgdon of Arlington, A. H. Johnson of Salem, S. D. Presby of Taunton, Emerson Warner of Worcester. Through the efforts of this committee of the Massachusetts Medical Society large numbers of petitions have been circulated in various parts of the State praying your honourable body to establish such a State Board of Health.

Now, while they would favour such a measure properly prepared and would warmly approve any measure which tends to better secure the health and welfare of the community, your memorialists desire to

present the following facts for your consideration:

In 1781 your honourable predecessors wisely granted a charter for the establishment of the Massachusetts Medical Society, which society was designed to include every physician in the State who possessed a suitable medical education and proper moral character. In fact,

these legislators went beyond the general idea of allowing membership to such physicians subject to the whims and caprices of other physicians; and knowing that prejudices and jealousies might possibly arise which, to the injury of the public, could debar suitable physicians from membership, they inserted a provision in the charter imposing "a fine of 500 dols. upon the President or other officer who should obstinately refuse to examine any candidate for membership." Notwithstanding such express provisions of the charter this society has of late years debarred from membership physicians of education and character simply because they differed from the majority in regard to the importance and efficacy of drugs in the treatment of the sick and the methods of administering the same. Moreover they have expelled from membership, as guilty of misconduct, those who held such diverse views and methods. Furthermore, if, for the saving of human life or the comfort of the sick, any member shall consult with or countenance any physician thus expelled or debarred from membership, he shall be deemed to have committed an offence worthy of his own expulsion from the said society. Such action on the part of said society your memorialists consider to be not only in violation of their charter, also destructive of "freedom of medical opinion and action" on the part of the profession and subversive of the rights of the community who, in cases of sickness, should be free to secure such talent or combination thereof as they may deem best without prohibition or hindrance from any individual or medical society.

The State Board of Health which existed from 1869 to 1879, in accordance with the practice of the Massachusetts Medical Society, practically debarred your memorialists from any professional relationship with that board. None of their number were appointed to its. membership, nor their opinions sought on matters pertaining to the health of the community; nor were they included generally with those who received from the board documents considered of importance to the medical profession. The same spirit of ostracism and intolerance exercised by the Massachusetts Medical Society toward your memorialists has in a large degree been intruded upon the institutions of the State. That physicians believe, or even hold opinions favourable to what is known as homoeopathy, is a sufficient reason for excluding them from occupying official positions or rendering professional service, thereby preventing the institutions from receiving or even testing the efficacy of what your memorialists, as well as large and rapidly increasing numbers of the community, believe to be an improved method of medical practice. Such exclusion not only harms the institution upon which it is forced, but also limits investigation and progress on the part of the medical profession, and works a serious injury directly and indirectly to the entire community. The same influence of the Massachusetts Medical Society extends to other public institutions not directly under the care of the State. In the Boston City Hospital, supported by the equal taxation of all the citizens, under the dictation of a medical board composed wholly of members of the above named society, not only are the inmates denied the privilege of receiving homocopathic treatment if they wish, but homœopathic medical students with unjust discrimination are refused admission to the wards of the hospital when they seek it in order to familiarise themselves with the care of the sick, and to learn the methods here practised, an intolerance not exercised, so far as we can learn, anywhere outside the State of Massachusetts. Digitized by GOOGLE

Under such conditions, can your honourable body wonder that we and that the public should look with distrust and suspicion upon any new movement emanating from the Massachusetts Medical Society? and we respectfully ask, in the establishment of a State Board of Health, that you will properly guard our interests and the far greater interests of the community which we represent. Therefore we ask that, should you deem it wise to again establish a separate State Board of Health, each of the then incorporated State medical societies, to wit: the Massachusetts Medical Society, the Massachusetts Homceopathic Medical Society, and the Massachusetts Electic Medical Society shall be therein represented; and that at least one, and not more than two, members from each of the above named societies shall be appointed members of the said Board of Health. Respectfully submitted by your memorialists,

I. T. TALBOT, JOHN L. COFFIN, H. C. CLAPP, FRANK C. BICHARDSON, A. J. FRENCH,

Committee of the Massachusetts Homoeopathic Medical Society.

### DR. LAUDER BRUNTON AND HOMEOPATHY.

As we intimated in our March number, a correspondent in the Medical Press, signing himself "Anxious Inquirer," drew attention to Dr. Brunton's wholesale appropriations of homeopathic remedies in his lately published work. For reasons best known to himself Dr. Brunton declined to give any explanation of his action, or to name the sources whence he had derived his information respecting the curative powers of Bryonia, Pulsatilla, and the rest. But Dr. Brunton was not left undefended; a champion came forward in the person of a Mr. Alfred S. Gubb, between whom and "Anxious Inquirer" a correspondence ensued. We have not space to give the whole of the correspondence, but we will give the first reply of "Anxious Inquirer," the second letter of Mr. Gubb, and the final reply of "Anxious Inquirer." We also append a letter by Dr. Dudgeon having reference to the correspondence:—

#### BRUNTON'S PHARMACOLOGY AND THERAPEUTICS.

To the Editor of the Medical Press and Circular.

Sir,—Mr. Gubb must surely be very inexperienced in controversy, otherwise he would hardly have ventured to misquote and misrepresent everything I said in my former letter, and then set himself to refute his own misrepresentations of my statements.

I did not "assume that the discovery of the physiological action of drugs or these (qu. their?) alkaloids is useless, not to say pernicious, when such knowledge is not forthwith applied to the treatment of disease." I said that the pharmacological knowledge of

staphisagria and its alkaloids acquired by laborious experimentation on frogs is useless in reference to the sole therapeutic use of staphisagria given by Dr. Brunton, viz., to kill lice.

I did not say it was "a matter of indifference to lice whether they be killed by arrest of respiration or otherwise." I said that those who employ staphisagria to kill lice do not care how the drug kills

the lice, provided they are killed.

I said," I have not in all Dr. Brunton's book been able to find a single instance in which the pharmacological knowledge acquired by experiments on frogs and other animals, gives the slightest hint as to the therapeutic use of the drug." But I did not confess my "ignorance of a single instance," etc. I have not had the advantage of reading Mr. Gubb's work On the Physiological Action of Cocaine on the Frog, which, for aught I know, may contain useful hints for the therapeutic use of that drug.

I did not speak of "homoeopathic drugs;" I spoke of "homoeopathic therapeutics" and of "homoeopathic treatment," which means the employment of drugs according to the homeopathic therapeutic rule, of which Dr. Brunton gives so many instances in

his "Index."

I asked Dr. Brunton to give his authority for the numerous uses of bryonia he gives in his "Index;" for he gives no reference to any authority for the therapeutic employment of that drug in his "Bibliographical Index," which he assuredly would have done had he been able to refer to any of the authorities your correspondent mentions for such employment of bryonia. As Mr. Gubb puts himself forward as Dr. Brunton's defender, Dr. Brunton apparently preferring to remain silent, perhaps Mr. Gubb will kindly give us those passages from Bartholow, Gubler, Husemann, and the rest, which testify to the therapeutic uses of bryonia I have quoted from Dr. Brunton—if he can find them. And, while he is about it, perhaps he will oblige us with the authorities for Dr. Brunton's therapeutic uses of pulsatilla, euphrasia, ignatia, achillæa, gold, calendula, cocculus, apis, phytolacca, rhus toxicodendron, and viola tricolor, to none of which does Dr. Brunton give any reference in his "Biliographical Index." I am told that all these medicines, with the therapeutic uses ascribed to them in Dr. Brunton's "Index," are to be found in such manuals of homeopathy as Dr. Hughes's Pharmacodynamics. It will be an important achievement if Mr. Gubb can show that the homocopaths have, as he suggests, stolen those remedies and their uses from the old school, for at present the evidence seems to be decidedly the other way.

I said nothing about having homoeopathic "principles" forced upon me; I said homoeopathic "therapeutics," for I must do Dr. Brunton the justice to say that he nowhere mentions the principles on which the remedies he has apparently taken from homeopathic

sources are given.

One word to Mr. Gubb before concluding. It does not add to the amenities of discussion (which should have for its sole aim the eliciting of truth) to start with saying that the remarks of your opponent are "lamentably deficient in soundness of argument:"
your business is to prove, if possible, your side of the question, and you may leave others to estimate the relative soundness of the arguments on either side.

But, after all, it is to Dr. Brunton, and not to Mr. Gubb or any other, that the profession looks for an explanation of his omission to give any authorities for the strange medicines and their strange therapeutic uses in his "Index of Diseases and Remedies." Until this. explanation is given, I must continue to be,

Yours, &c.,

1st April.

AN ANXIOUS INQUIRER.

To this Mr. Gubb replied:—

Sir,—I fear I must plead guilty to having unintentionally misrepresented the assertion of your correspondent with respect to the indifference of lice as to the particular mode by which they are killed. But, having made the amende honorable on this point, I am fain to confess that I cannot see that I have misinterpreted his meaning in, the other and more essential details. Your correspondent says, in, reference to the alleged appropriation of drugs, etc., from the homeopathic text-book (with which his friend, "who has dabbled in homocor pathy," appears so suspiciously well acquainted), that "many more of the medicines as well as the diseases for which they are employed in the Index are derived from the same source." I repeat that theuse of a medicine by homoeopathists does not confer a monopoly on them of that drug, not even for particular diseases. Does your correspondent claim certain diseases also as homocopathic? His apparent surprise, too, that Dr. Brunton should explain the uses of a drug-"which is not even in the Pharmacopæia" is rather odd; it is but very recently that chloral hydrate, nitro-glycerine, etc., have received. official sanction, and plenty of drugs well worthy of notice still remain out in the cold, of which bryonia may possibly be one.

Is not the use of acconite in pyrexia one of the examples which. "Anxious Inquirer" professes himself unable to find, of the physiological action of a drug affording an indication of its therapeutical application? Yet this drug, although claimed as a homocopathic innovation, could not have been so employed on homocopathic prin-

Buch examples abound, but for obvious reasons I am unable to go. through the book in order to demonstrate their frequency, nor, for similar reasons, can I accede to his amiable proposition to give a formal and gratuitous lecture on the therapeutic uses of the numerous. drugs he mentions. I have indicated where the information asked for can be found, and it behoves your correspondent to look up the-

The eagerness of "Anxious Inquirer" to hand over to homeopathists the exclusive credit for the use of so many well-known drugs. induces me to ask what particular principles he himself professes. think I smell a homosopathic rat beneath his assumed ire at thealleged depredations on unorthodox principles.

In conclusion, allow me to thank your correspondent for his remarks. ament the amenities of discussion—advice is not to be disdained, even

when mal à propos.

I am, Sir, yours, etc.,

ALFRED S. GUBB.

The next week the following reply appeared, and also the **letter** on Aconite :—

Sir,—In my first letter I asked for Dr. Brunton's authority for the therapeutic uses of bryonia he gives in his "Index of Diseases and Remedies." Mr. Gubb, who rushed in where Brunton feared to tread, replied that "bryony, pulsatilla, phytolacca, apis, etc., all are duly dealt with in the United States and German Pharmacoposias, as well as by Bartholow, Gubler, Huseman, e tutti quanti." I asked him to give the passages from these authorities which testify to the therapeutic uses of bryonia I quoted from Brunton, and to Brunton's therapeutic uses of several other drugs I named. Being unable to do so, he now politely tells me to look them up for myself, which would, as he well knows, be a fruitless search, as they are not contained in any of the works he refers me to. He tries to cover his discomfiture by alleging that I proposed that he should "give a formal and gratuitous lecture on the therapeutic uses of the numerous drugs I mentioned," which is contrary to fact, by insinuating in his courteous style that I am a "homoeopathic rat," and by asking me what principles I profess. Perhaps I hold with Dr. Wilks that there is no dectrine in reference to therapeutics, and, therefore, there can be no therapeutic principles to profess, and I might retort by asking Mr. Gubb what principles he professes. But all this is of absolutely no interest to your readers, and is utterly irrelevant to the questions which I once again put to Dr. Brunton—not to Mr. Gubb, for he has satisfactorily proved his inability to answer them-1. What are Dr. Brunton's authorities for the novel remedies and novel uses of old remedies he gives in his "Index of Diseases and Remedies"? and 2, Is it the case that most, if not all of these, are taken from homosopathic sources? Straightforward replies to straighforward questions are what are expected by the profession and by Your obedient servant.

15th April, 1886.

An Anxious Inquirer.

# THE ANTIPYRETIC POWER OF ACONITE.

To the Editor of the Medical Press and Circular.

Sir,—The discussion going on in your columns with reference to "Brunton's Materia Medica and Pharmacy" is extremely amusing to those who are conversant with homosopathic literature and practice. One of the most amusing things is Mr. Gobb's assertion that "the use of aconite in pyrexia is an example of the physiological action of a drug affording an indication of its therapeutical application. this drug . . . could not have been so employed on homocopathic principles." Mr. Gubb is quite right in asserting that the use of aconite as an antipyretic is an example of the physiological action of a drug affording an indication of its therapeutical application, but he is ludimously wrong in saying it could not have been so employed on homoeopathic principles. In 1805 Hahnemann published in Latin a work entitled "Fragmenta de Viribus Medicamentorum Positivis," in which he gives an account of the physiological action of aconite observed by himself in experiments on the healthy human subject. From the physiological action thus disclosed he was enabled to infer its utility as an antipyretic or antiphlogistic, as it was then called. Digitized by GOOSI

He instituted more extensive experiments with it later, and, in the first volume of his "Materia Medica Pura," published in 1811, in his prefatory remarks to aconite, he says: "The following symptoms . . . reveal to the thoughtful homosopathic physician a prospect of relieving morbid conditions in which traditional medicine has hitherto employed its most dangerous methods, e.g., copious blood-letting and all its complex would-be antiphlogistic treatments. I allude to the so-called pure inflammatory fevers." Since then the adherents of homeopathy have used aconite as their chief antipyretic remedy in inflammatory fevers, which certainly looks as if it "could have been so employed on homoeopathic principles." If Mr. Gubb will do me the honour to look at my article on aconite in the first volume of the "Materia Medica, Physiological and Applied" (Trübner, 1884), he will find at page 9 the following passage: "The effects of aconite and its alkaloid aconitine on the system generally are to cause all the phenomena of a very distinct fever of the acute inflammatory kind. No medicine produces, in anything like the completeness of aconite, every feature of this kind of fever, from the preliminary chilliness, through intense rigor to heat and final perspiration." We have therefore some foundation for asserting that the employment of aconite in inflammatory fever is an illustration of the homosopathic employment of a drug deduced from the knowledge of its physiolo-Yours, etc., R. E. Dudgeon, M.D. gical action. London, 14th April.

# REVIEWS.

## MANUAL OF PHARMACODYNAMICS.1

We are delighted to find that Dr. Hughes has been compelled to issue a new edition of his great work. The first edition has been rapidly taken up, and a work so indispensable as this most complete of systematic works on Materia Medica cannot be allowed to be out of print. The new converts to our ranks would be lost if they had not their "Hughes" to appeal to; and it is cruel to think of what would happen to Old Physic if the rising professors of Materia Medica could not obtain a copy of the Pharmacodynamics when in want of a "discovery" wherewith to immortalise themselves. The Bruntons, Ringers, and Murrells of the future would cry out for a new edition of the Pharmacodynamics if the children of Hahnemann did not.

It is no small satisfaction to find that Dr. Hughes has not felt it necessary to make great additions to the new issue. When a book grows beyond a certain size its usefulness is apt to decrease correspondingly, and a "Manual" should not require a reading-desk to hold it. In the supplementary chapter (which, we understand, is to be purchased separately) Dr. Hughes has

Richard Hughes. London: Leath and Ross. 1886.

brought together all the more important therapeutic advances that have been made since the fourth edition appeared. We heartily congratulate the author, publishers, and purchasers-to-be of the new edition of this standard work.

#### ATHLETIC SPORTS.1

In this very pleasant little pamphlet of thirty-two pages Dr. Pope deals with a subject of much importance, and has brought together a great deal of useful information. His advice and his warnings are equally necessary for the rising generation to carefully note. On the subject of diet in training Dr. Pope says:—

"Further, the practice of athletics is a promoter of temperance in all things. No one can excel in athletics who indulges in dissipation of any kind. Abstinence from alcohol in young men is essential in order to secure complete bodily vigour. That its moderate use has advantages under certain circumstances and in certain conditions, I have no doubt at all. But in judicious training and in competing, it not only has no place, but its use is detrimental."

### And again :-

"Food should be mixed, snimal and vegetable, the former being gradually increased in quantity, its amount being determined by the power of digestion possessed by the individual. A purely vegetable diet is not conducive to physical strength. Many years ago a friend of mine was the house-surgeon of a large dispensary in Birmingham. His duties consisted in seeing and prescribing for a very considerable number of people every morning from nine o'clock until one; after dinner he devoted his time until six or seven in the evening to visiting the sick poor at their homes, spending the remainder of the day in reading. He made an experiment with vegetarian diet on himself for three months, when the conclusion was forced upon him that. while his purely intellectual work was much better done, while his head was clearer, the physical exertion of walking for four or five hours in the afternoon was greatly added to. All alcoholic stimulants should be rigidly abstained from during training, and the smoking of tobacco avoided. In health, and to promote physical strength, alcohol is useless and injurious; while the influence of tobacco on the heart prevents that full development of that important organ, which is the only safeguard against its being injured when putting forth a great and continuous muscular effort.

Swimming is strongly recommended, and lawn-tennis comes in for its rightful share of praise. With this very wholesome piece of advice—" Keep your clubs free from the taint of gambling," Dr. Pope brought his interesting address to a close.

<sup>1</sup> Athletic Sports: their Advantages and Dangers. An Address delivered before the members of the Tunbridge Wells Debating Club, March 23, 1886. By Alfred C. Pope, M.D., Vice-President of the Club. Tunbridge Wells: Courier Printing and Publishing Company.

### TRANSACTIONS OF THE HOMŒOPATHIC MEDICAL SOCIETY OF THE STATE OF PENNSYLVANIA, 1885.1

This work contains the list of officers and members of the Homeopathic Medical Society of Pennsylvania, and an account of its proceedings for the twenty-first year of its existence. 1885. The activity and enthusiasm of the society is patent, and the book brings home to British homeopathists how much more favourable to the adoption of our scientific truth the professional surroundings of a single State in America are to those we enjoy at home. That the favourable position of homeopathy in the United States is due to the earnestness and scientific devotion of its followers as well as to the benefits of a new country offering State protection and encouragement, the Transcations before us evidence. The book affords instructive reading, and the scientific spirit and work devoted to all the papers render it difficult to individualise for comment.

Dr. C. G. Raue contributes a paper on the Symptomatic Treatment of Diseases, written in an entertaining style. He frequently quotes Hahnemann, and shows how deep was the Master's insight into inherent faults of the practice of medicine outside the pale of homoeopathy, by pointing out how reflections of Hahnemann's on the treatment of disease, written nearly eighty years ago, require but slight modifications to serve as weapons against the old-school treatment of to-day. student who skips most of the treatment in his ordinary medical text-books (and who does not?) will recognise as no caricature the quotation: "If A should not answer, try B, and if this will not do, a choice lies among C, D, E, F, and G; I have often found H and K of service; others recommend most highly J and L, and I know some who cannot sufficiently praise M, W, and Z, whilst others extol N, R, and T; S and X, also, are said to be not bad in this disease. Some English physician recently recommended Q in preference to all others in this affection; I certainly am inclined to give it a trial."

Among these most interesting essays are:—"Exotic Drugs for Provings," by Dr. Fornias; "Meteorological Influences upon Diseases and Symptoms," by Dr. Bushrod James; "Belladonna in Children's Diseases," by Dr. Cranch; papers on Whooping Cough, Infant Feeding, Croup, Intestinal Obstruction, Spinal Irritation and other diseases, with accounts of surgical and gynecological cases and operations. Dr. Alvarez contributes a communication on Cholera, in which the recent cholera epidemic in Spain forms another statistical proof of the immense saving of life offered by the homocopathic treatment of this disease.

1 Transactions of the Homogonathic Med

<sup>&</sup>lt;sup>1</sup> Transactions of the Homocopathic Medical Society of the State of Pennsylvania, 1885. Sherman and Co.

The State Society publishing these Transactions has 211 members; and in the State there are nine homoeopathic hospitals-with 472 beds and nearly 500 practitioners of the system.

### MATTEI'S REMEDIES.1

THE author of this pamphlet is certainly not wanting incourage. He is satisfied that the so-called electro-homosopathic remedies of the notorious Italian Count do possess curative virtues of a remarkable kind, and he is not afraid to avow his convictions publicly. In this he is deserving of praise; but when he goes on to defend the Count for keeping his remedies and their mode of preparation a secret, he is treading on dangerous. ground. In medical science there should be no secrets. Dr. Kennedy is enthusiastic in praise of the Count's preparations; and, for our part, we do not deny that they may possess curative power; but until their author will inform us what they are,. and how he prepares them, we must refuse to put our intelligence in our pockets and follow the directions he gives, swallowing his marvellous pathology whilst we are making our patients swallow his globules. It does not require intelligent physicians. to prescribe Morrison's pills; if our patients like to indulge in these luxuries they are welcome to do so on their own responsibility. In the same way, if they believe in Mattei, they may take his medicines as he directs. This is a free country. Dr. Kennedy tells us the remedies are homoeopathic. If he would institute provings of the drugs from which the remedies are said to be prepared, this would be of more service than hisbare assertion, and he would confer a benefit on medical science. Until we have something better offered us than blind faith in the ridiculously self-opiniated old Count, we shall abide by the homocopathy of Hahnemann. That has served us very well. Dr. Kennedy narrates a number of cases presumably cured by the Mattei remedies. One of them was a case of aneurism so far cured that the patient was able to do light work. They could all be more than matched without difficulty from the records of homoeopathy. We recently had a caseof abdominal and thoracic aneurism, which came to us as incurable from one of the London Hospitals. Under Baryta Carb. 3x trit. the man got practically quite well. He was a labourer on the railway, aged forty-five; and now he has been for six months doing, not "light work," but full work, as before he was taken ill. If this case had been treated by a secret remedy it would have been a miracle. As it was a mere

<sup>&</sup>lt;sup>1</sup> Notes on Count Matter's Electro-Homosopathic Remedies. By Dr. A. S. Kennedy, Physician to St. Saviour's Hospital, London, N.W. London: Leath and Ross. Brighton: Headland and Co. 1886.

cure by homoeopathy it is an everyday affair. It is a pity Dr. Kennedy did not test for sugar in the diabetes case he relates. He must expect his diagnosis in this case to be received with reserve.

In conclusion, we wish to remark that Dr. Kennedy is perfectly right to use Mattei's remedies where he thinks he is doing the best for his patients by so doing. But we warn him that if he is constantly using this "system." as it is called, he will be gradually losing skill in the use of homeopathy, and coming to rely on the unintelligent directions of Mattei instead of the rational method of Hahnemann. Hence he must not set down his own failures to cure by homeopathy to the fault of homeopathy. This is our chief objection to the use of these productions by medical men. It comes in the end to be a choice between Mattei, the dealer in secret nostrums, and Hahnemann, the enlightened physician. It is impossible to serve both masters well. For our part, in spite of Dr. Kennedy's enthusiasm, we choose Hahnemann.

#### EMPYÆMA.1

When the chest contains a quantity of pus, the chances of its being absorbed are so few, and the dangers and delay of natural evacuation are so many and so great, that it is the imperative duty of the medical man attending such a case, when he is sure of his diagnosis, to open the chest and let the pus out. Experience has proved that the patient has by far the best chance of recovery when this is done, and the earlier the better. Dr. Herbert C. Clapp has had a considerable experience in cases of the kind, and he has done well to put it into an accessible form, so that it may serve to help his colleagues. He does not approve of aspiration, nor of pleurotomy. He has devised several ingenious arrangements to facilitate the outflow of the pus and the washing out of the cavity. His results have been most encouraging.

# INSTITUTIONS.

## LONDON HOMŒOPATHIC HOSPITAL.

The Thirty-sixth Annual General Meeting of the Governors, Donors, and Subscribers of the Hospital took place in the Board Room of the Hospital on Friday, April 30, 1886, the Lord Ebury

<sup>1</sup> Empyæma. Twenty-four Cases of the Radical Overation. By Herbert C. Clapp, M.D., Professor of Diseases of the Che-t in the Boston University School of Medicine. Boston: Rand, Avery, and Co. 1886.



(President) occupying the chair. Among those present were Major Vaughan Morgan, Major-General Beynon, Mr. Alan E. Chambre, Mr. Rosher, Dr. Yeldham, Dr. Moir, Dr. Clarke, Dr. Dudgeon, Dr. Dyce Brown, the Rev. Dacre Craven (Chaplain). and several ladies.

The Report, which was an extremely favourable one, was unanimously adopted on the motion of Lord Ebury, seconded by

Major Vaughan Morgan.

It is hoped that the Bazaar to be held on the 4th and 5th June will bring a substantial addition to the Bayes Ward Fund. The Art Distribution is postponed until December, by which time it is expected that a very valuable collection of pictures will be got together.

#### CROYDON HOMCEOPATHIC DISPENSARY.

#### MEDICAL REPORT FOR 1885.

THE Dispensary has been open two mornings in the week.

There have been 422 patients under treatment, the number of attendances being 1,607.

#### Reported—

Cured or relieved	•••				•••	•••	314
No improvement	•••	•••	•••	•••	•••	•••	38
No report			• • •	• • •			70

Dr. J. Delepine having now settled in Croydon, the Dispensary has been open four days in the week since the beginning of the present year.

T. E. Purdom, M.D.

### SHEFFIELD HOMCEOPATHIC DISPENSARY,

### 35, CHURCH STREET.

Or this Institution, established in 1885, we have received the preliminary report, from which we quote as follows:—

"Twelve months have elapsed since this Dispensary was opened; and it is satisfactory to be able to announce that 1,016 patients have attended during the year, a number sufficient to prove the necessity for such an institution in our town. The appeal for subscriptions has not, however, hitherto been responded to in the way it was hoped; and in spite of the fact that the medical officer has received no payment for his services, and that the chemists have dispensed all the prescriptions without any remuneration whatever, there is still a balance due to the treasurer as the result of the year's working, irrespective of the first expense. This should not be the case; and it is to be trusted that every homeopathist in Sheffield will at once do something to aid in the success of the charity by becoming a subscriber. The Dispensary is entirely free to all provided with subscribers' recommendation tickets. Those not wishful to be dependent upon charity, and able to pay a small sum, can attend without subscribers' recommendations,

and receive advice and medicine for the sum of 1s. for a single visit, or for 2s. 6d. per month. This provision meets the growing objection of many philanthropic people that the medical charities are abused through the attendance of those able to do something towards their support. It is to be hoped that the day is not far distant when Sheffield will possess a homeopathic hospital; in the meanwhile our united aim must be to establish the Dispensary upon a firm foundation.

"ISAAC C. THOMPSON, Hon. Sec."

We would respectfully suggest the propriety of converting the Institution into a Provident Dispensary, like the one which has prospered so signally at Northampton, as explained in our pages by Dr. Clifton some months ago.

# GLEANINGS.

#### HOMŒOPATHY.

THERE is nothing ridiculous in the principle of homoeopathy when we come to think of it. On the contrary, it would be a strange thing if drugs should act exactly in the same way on the human body when it is diseased and when it is healthy. The conditions being altered, scientific people naturally look for altered effects. It is the property of ipecacuanha wine to make healthy people sick; but when people are already suffering from sickness and nausea, how does it act? Of course, if a very large quantity be given it will make the person more sick; but if one or two drops of the wine only are given it acts in the opposite way, and cures the sickness. The principle of homocopathy lies in this fact. Diseased conditions—such as nausea and vomiting -are removed by drugs which have themselves the power of producing similar diseased conditions in the healthy. Another example may be taken in nux vomica (the "vomit nut"). Most people know the bitterness and nauseousness of this drug, from which strychnine is obtained; and a good many people know that for biliousness and the unpleasant condition of stomach experienced in the morning after too free indulgence in the pleasures of the table the previous evening, there is nothing to equal a few drops of nux vomica. This, again, is homoeopathy; and it was Hannemann who first divined, from observing the effects of the drug on his own healthy body, that it would cure these and other morbid conditions.

Perhaps the greatest stumbling-block in the way of the general acceptance of homeopathy has been the small dose employed by those who practise it. The small dose has nothing to do with the *principle* of the system. The principle refers only to the selection of the drug. If a person is suffering from sickness every morning, nux vomica, which has the power of producing a like condition, will be chosen as the most suitable

remedy; and the drug is homocopathic to the condition, no matter in what dose it may be given. How large or how small the dose should be is an entirely different question, and must be settled by experience. In point of fact many homocopathists give large doses and many give very minute ones; the one point on which all are agreed being this—that the dose required for curing any condition must be smaller than that required for producing it. And, again, there is nothing ridiculous in this. A part which is diseased—say an inflamed finger or eye—is much more sensitive to ordinary influences than a healthy one; why, then, should not a part when diseased be much more sensitive to that drug which has a special affinity for it, than when it is healthy? This is a question that can only be decided by practice; and practice has decided that such increased susceptibility does actually exist in disease.—Kensington Review.

# GENERAL CORRESPONDENCE.

# INTERNATIONAL HOMŒOPATHIC CONVENTION, 1886. To the Editor of the Homæopathic World.

MY DEAR COLLEAGUE,—At the Convention held in London in 1881 it was determined to hold the next meeting at Brussels, with the view of providing a central and neutral place at which the Continental homeopathists (hitherto so sparsely represented at our gatherings) might meet one another and their British and American colleagues. I was desired to act as Permanent Secretary of the Convention, and in that capacity I communicated the choice made to Dr. Martiny, editor of the Revue Homeopathique Belge, requesting him to make it known to the homeopathists of Belgium. In due time I learned from him that the Association Centrals des Homeopathes Belges had accepted the task of organising the meeting, and had appointed a committee for the purpose. To this body, accordingly, I made over my responsibilities, putting myself at their disposal for any counsel or assistance they might require.

I now learn, to my great regret, that our Belgian colleagues find themselves unable to complete the task they have undertaken. Disappointed at the paucity of men and material with which they are threatened, they declare the Congress impracticable, and wish to adjourn it to 1889, making Paris its seat, on the occasion of a Universal Exhibition then to be held. It seems to me that this proposal cannot be accepted. Our International Conventions must be regularly quinquennial, if they are to be kept up at all; and the reasons for preferring Brussels to Paris on this occasion continue to hold good. Many of us

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have made our arrangements to attend; our own British Congress has been omitted this year to enable us to do so; and it is most undesirable at this late hour to change the plans determined on.

I therefore feel it my duty to maintain the resolution entrusted to me to be carried out, and in default of the homosopathists of

Belgium must myself take the initiative in its execution.

I accordingly give notice that the International Homosopathic Convention of 1886 will be held at Brussels on Tuesday, the 3rd, Wednesday, the 4th, and Thursday, the 5th of August next; the first day to be devoted to General Considerations bearing on Homosopathy, the second to Materia Medica, and the third to Clinical Medicine. The exact place and hours of meeting shall be announced in your next issue.

Being called upon thus late to organise the Convention, I earnestly appeal to my colleagues throughout the world for their co-operation and assistance. Let those who are able at once send me papers on the subjects mentioned as those to be considered; and—as funds will be required—the contributions of all who desire to see the Convention adequately carried out are hereby solicited. Dr. Dudgeon, of 53, Montagu Square, London, W., has kindly consented to act as treasurer, and will receive and thankfully acknowledge all moneys sent for the purpose.

If a united effort is thus made, the Convention of 1886 may

not be unworthy of its predecessors of 1876 and 1881.

Begging you to insert this letter in your journal,

I remain,

Yours very faithfully,
RICHARD HUGHES,
Permanent Secretary Int. Hom. Conv.

Brighton, May, 1886.

# HOMEOPATHY AT NICE. To the Editor of the Homeopathic World.

Monsieur le Docteur et Honoré Confrère,—Je lis dans un nombre de l'Homœopathic World que par suite du départ du Dr. Proell et de la mort du Dr. Guerrier, Nice se trouvait privée de médecins homœopathes.

Vous avez été induit en erreur, de bonne foi, sans doute, et voilà pourquoi j'espère que vous voudrez bien rétablir la vérité

des faits dans un prochain numéro.

Il y a actuellement à Nice quatre médecins homosopathes à savoir: le Chevalier Pierre Arnulphy, établi depuis 30 ans; votre serviteur, Dr. Bernard Arnulphy, établi depuis 10 ans; le Dr. Meyhoffer, établi depuis 19 ans; le Dr. D'Espiney, établi depuis 9 ans.

Vous voyez que Nice n'est pas si déshéritée qu'on veut bienle dire.

Dans l'espoir que vous voudrez bien publier cette rectificationveuillez agréer, monsieur et honoré confrère, avec mes remerciments anticipés, l'assurance de mes sentiments devoués.

Dr. Bernard Arnulphy.

Nice, 6, Jardin Public, 18 Avril, 1886.

#### To the Editor of the Homeopathic World.

SIR,—I have read in the Homocopathic World for this month your remarks upon the want of a homocopath at Nice, and I should be glad, if you will allow me, to correct an impression which has been made upon the minds of some medical practitioners as to the actual need of a practitioner at Nice. It is, I believe, true that the practitioner has recently died, and Dr. Proell is leaving for a more lucrative sphere, but there still remain Drs. Meyhoffer, Anulphy, and myself. I have not resided at Nice permanently during the whole season,. it is true, but I have been there for a considerable time during: each season for the last five years, and I am just on the point of presenting myself for examination to the French Board of Examiners for the necessary qualification to enable me topractise there regularly during the winter season. I have resident patients at Nice, and many others who are there for the winter only as visitors. I should be glad if you would be good enough to publish this letter, not because of any friendly competition, but that no gentleman may take the trouble and incur the expense of going to Nice expecting to find a practice ready to his hand, only to be disappointed and out of pocket.

I have some considerable knowledge of the various health resorts and places of interest in both France, Italy, and Germany, and I should say that any good man going to Florence would find plenty to do. Were I not intimately connected with Nice, and had I not many patients there, I should myself have gone to Florence. I may say that while it is a difficult matter to get a diploma to practise in France, no examination is necessary for Italy. All that is needful is to hand one's diplomas to the English Consul, and he will get them acknowledged and one's name registered by the authorities without any cost, giving a right to practise. It is not absolutely needful to speak Italian; French is very useful, and Italian is not difficult to learn. Should any gentleman think of taking up Florence next season, I should be happy to give him all the information in my power as to cost of going, usual fees, etc. I shall, however, be abroad

till 1st July, but any letters will be forwarded.

I am, Sir, yours faithfully,

JAMES GOWING-MIDDLETON.

The Elms, Scarborough, 15th April, 1886.



#### THE HOMŒOPATHIC LEAGUE.

To the Editor of the Homocopathic World.

SIR,—The diffusion and acceptance of the homeopathic principle and its practice as a rule of medical treatment is the earnest desire of all those who believe in the truth of homeopathy. Although the number of believers in Hahnemann's. discovery have largely increased during late years, still hundreds of the people of the United Kingdom die under medical treatment who we homoeopaths believe could be saved under homoeopathic treatment. I have known numbers of cases within my own observation. This is a startling fact, and a very heavy responsibility rests upon all who realise its truth, to convert to homeopathy every one within their circle. It is a terrible thing that men, women, and more frequently children go down to the grave prematurely whose lives might be spared. But so it is. This view is not sufficiently worked up by our homeopathic journals. The present system of civilisation is so made up of compact organisations designed to produce solidity that we havea hard and fast line drawn. Those laws or customs which have been framed to preserve a measure of Truth, become later on obstacles to a greater Truth that is a later discovery. judice, vested interest, confirmed habit, transference of power and credit to other hands, destruction of celebrated reputations, all these not unnaturally produce opposition. It is certainly a fact that a truth which is persecuted is not lost sight of, but rather becomes ventilated, while competition induces competitive A little more allopathic persecution would rather emulation. do good than harm to homeopathy, and this League may set it going. Opposition produces a propelling force in the minds of homoeopaths that helps the new faith onwards, but still while doctors differ the people die.

It is a matter of serious consideration whether we homeopaths. who are in possession of a great truth have done the best that could have been done in the past to bring it home to the minds of all within the length and breadth of the kingdom. Have not our efforts been too individualised and too devoid of shape toconstitute an organised effort? If there are no teachers how can there be disciples? The only teachers homocopathy can get to promulgate its truth by practice are a few conscientious medical men who have been converted from allopathy. converts are of course to be received with joy, but the advancement of principle should not be allowed to depend upon so limited a body of men; and that it should have been so in the past is a grave reflection upon homeopaths both medical and lay. The idea of the past that allopathic men would in time bewon over has been to me for the last ten years absurd. allopaths are now using our paddles to paddle their old decrepid.

cance; in fact they have stolen our paddles, and are heading out into the lake with a halloo of derision. Homeopathy should be put into a position to lawfully compete with allopathy in respect to schools of medicine, and then let the results speak for the one side or the other.

Great care is desirable in forming the governing body of the League, that geographically the medical and lay element are fairly represented. The presidents, vice-presidents, patrons, general committeemen, and managing committeemen should consist of a medical and lay representative from each town where these can be found.

The League must look to the general advancement of homoeopathy, particularly the sanction by Parliament of a Charter for the foundation of a Homoeopathic College, with licensing power to such college to grant diplomas to practise medicine and surgery.

The subscription to the League might be half-a-guinea a year to become a registered member, and a gift of not less than

£50 to constitute a patron.

Yours, etc.,

May 18th, 1886.

E. B. IVATTS.

#### OUR ALMA MATER.

## To the Editor of the Homeopathic World.

Sir,—We homosopaths are being educated to look to our London School as the head and centre of our profession, our Alma Mater, from whom her sons may look for "light and leading," and whose ear is ever open to their cry. May I not ask, therefore, if in that school there be no young and ardent disciple, fresh from ward and class-room, who is thirsting to labour for his and our great master, Hahnemann—to win new laurels for his brow! For such a labourer—and in that noted School there must be many such—here is a vineyard waiting to be tilled, one which, to a wise worker, will yield good fruit.

The harvest is plentiful, let it not be thought the labourers are few, or that our noble faith is languishing for lack of fresh blood; for then "Ichabod!" must be our cry, and our raiment

"dust and ashes." I am, Sir,

Your obedient servant,

BRADFORD.

# VARIETIES.

RINGWORM.—Dr. Thin says (British Medical Journal) that the application of croton oil to ringworm of the scalp often cures it very rapidly, it also often fails. And when it does cure it frequently leaves a permanently bald spot, the action being so intense as to destroy the hair bulbs. Dr. Foulis contributes the following:—"The following is a simple and very effectual method of treating ringworm of the scalp. The child affected is made to sit down on a chair before a washing-basin half filled with warm water; a folded towel is first of all tied round the child's forehead, in such a way that no fluid poured on the head can trickle down into the eyes. It is best to cut the hair short all round the affected part. If there be many spots of ringworm, the whole head may be closely cropped. Have ready a two-ounce bottle of common spirit of turpentine, an ounce bottle of tincture of iodine, a camel-hair brush, and a 10 per cent. cake of carbolic acid soap. While the child bends forward over the basin, the spirit of turpentine is freely poured over one or more spots at a time, the forefinger being used to rub the turpentine well into the Almost immediately the dirt and greasy scabs disappear, and the short broken hairs are seen to stand up like bristles. Generally, in about three minutes' time, the child cries out, 'Oh, it nips!' then we know that the turpentine has penetrated deeply. Immediately, the piece of carbolic acid soap is well rubbed into the parts which have been acted on by the turpentine, and warm water is freely applied to make this soap into a lather, by which means the head is well washed, and soon appears to be beautifully cleaned. The smarting, such as it is, quickly disappears after the application of the soap. The head is then well dried with a towel. Common tincture of iodine, in two or three coats, is now painted well over the affected parts, and allowed to dry. As soon as the hair is dry, some carbolic oil (1 in 20) is rubbed all through the hair to catch such spores as may be there. This treatment, applied every morning, or morning and night in very bad cases, generally cures the worst cases in the course of a week. During the last five years I have used no other method of treatment. The explanation of its success is as follows. Common spirit of turpentine is a powerful germicide; but it is a still more powerful solvent of the sebaceous or greasy matter of the scalp, and it rapidly penetrates into all the epithelial structures of the scalp, the affected hairs included, and clears the way for the application of a still more powerful germicide, namely, tincture of iodine. It is an interesting chemical fact that spirit of turpentine, or, more correctly, oil of turpentine, is a powerful solvent of iodine. This solution of iodine in turpentine is a most powerful germicide, and quickly destroys the fungus of ringworm. If tincture of iodine be applied to the spots which have been treated, as above, first with the spirit of turpentine, and then washed with carbolic acid soap and water, it finds its way down into the epithelial tissues, and into the hair follicles, following the course which the spirit of turpentine has taken. It is of no use to apply watery solutions of germicides, until the greasy or sebaceous matter of the scalp has been first removed. In some severe cases I have applied a solution of iodine in turpentine, ten grains to the ounce, instead of the tincture of iodine,

after the head has been washed and cleaned; but in most cases the application of tincture of iodine, after the part has been acted on by the spirit of turpentine as above described, is quite sufficient to destroy the disease. Ringworm on other parts of the body may be treated with spirit of turpentine and tincture of iodine in exactly the same way. One great advantage of this treatment is that it may be applied to the head of the youngest child, and causes little or no distress at any time."

Poisoning by Tinned Food,—Dr. J. G. Johnson, in a paper read before the Medico-Legal Society of New York, comments on six cases of corrosive poisoning from eating "canned" tomatoes. The symptoms were intense gastric and intestinal disturbance, followed in the worst cases by epileptiform convulsions and coma. Dr. Johnson's investigations led him to conclude that the noxious substance was a combination of muriate of zinc and muriate of tin. From his remarks it appears that in some establishments the tops of preserving tins are soldered on, not with a resin amalgam, but with a saturated solution of zinc in muriatic acid. When this mixture is too freely applied, it overflows into the tin and poisons its contents. danger from this process has been so far recognised that in the State of Maryland there is a law prohibiting the use of "muriate of zinc flux." Dr. Johnson appends to his paper a few useful rules for the detection of unwholesome tinned meats by the appearance or handling of the tins. "If the lid of a tin has two solder holes instead of one (showing that the tin has been exhausted a second time to liberate decomposition gases), the contents are likely to be unwholesome. Press up the bottom of the can. If decomposition is commencing the tin will rattle the same as the bottom of the oiler of your sewing machine does. If the goods are sound it will be solid and there will be no rattle to the tin." Rust round the inside of the head of the tin produced by the eating away of the tin-plating by a corrosive substance should also be looked on as suspicious. (Medico-Legal Journal of New York, April, 1884.)—Pract., February, 1885.

How some Reputations are Made.—The Referee is responsible for the following:—"Apropos of doctors, here is a true story. The other day I met a poor fellow and his wife who had been supers at the Adelphi, but who had been compelled to give up, owing to ill-health. They were both elegantly dressed, and I expressed my surprise, as I had heard they were in needy circumstances. I congratulated them on the evident gain of wealth which had compensated the loss of health. 'Oh, sir,' said the man. 'these are not our own clothes; they are lent to us by Dr. ——.' 'Lent to you by Dr. ——!' I exclaimed; 'whatever for?' 'Why, you see, sir, we are supering for him, and he finds the dresses.' 'Does he run a theatre then?' I asked. 'Lor', no, sir!' was the reply; 'me and my wife, and some of the most respectable-looking of the out-patients at —— Hospital, has a shilling to go and sit in his receiving-room for two hours a day. We're what they call dummy patients.' I 'tumbled' in a moment. The doctor was young, and anxious to have a reputation for a wide practice. Patients calling found his rooms crowded, and gathered from the fact that he had a widespread reputation. The idea is excellent. I want a dozen supers at once to

dress up as editors, and come and clamour on my doorstep for copy.
Only persons with a thoroughly editorial appearance need apply."

ANEURISM OF THE COMMON CAROTID, CURED BY REST, IODIDE OF Potassium, AND COMPRESSION. By George D. Mackintosh, L.K.Q.C.P.I.—Mrs. T. P—, aged thirty-five, was first seen by me on March 27, 1883. I found her to be suffering from a pulsating tumour on the right side of the neck, opposite the upper border of the thyroid cartilage. On palpation the tumour was found to pulsate in an expansile manner—that is to say, the pulsation was equal all round as far as could be felt. On pressure the tumour could be completely emptied, and when the fingers were removed slowly refilled again by several successive pulsations; it was evidently in connection with the common carotid artery. On auscultation a distinct bruit was audible. The patient suffered considerable pain, both at the site of the swelling and in the face, of a neuralgic character. Mr. Henry Summerhayes, who saw the case with me on this occasion, fully confirmed my diagnosis of aneurism of the common carotid at its point of bifurcation into the internal and external carotids. We prescribed in the first instance considerable doses of iodide of potassium, with complete rest in the recumbent position, and a spare diet. On April 23rd, there being but little improvement in the symptoms, and the pain being so severe as to necessitate the frequent hypodermic injection of morphia, I determined to try partial compression by means of a firm elastic collar with a cork pad attached, so arranged as to lie completely over the tumour and to empty it of blood, whilst the circulation was not greatly interfered with; at the same time the previous treatment was persevered with. After a week's use of the collar the patient professed herself greatly better, the pain being much less severe; but there was considerable pulsation to be felt through the pad; I therefore somewhat tightened the lacing of the collar, and this had to be done again and again at intervals of a few days. At the end of three months I removed the collar completely, as there was no longer any pulsation to be felt over the tumour, which had completely solidified, and has since given the patient no She is now (May, 1885) going about her work as more trouble. usual. Mr. Summerhayes again saw the case last summer, and was greatly surprised at the cure effected, which he acknowledged to be complete.—Lancet, August 15.

TRIGEMINAL NEURALGIA.-Dr. Osmic Acid Injections in Schapiro in a recent lecture before the St. Petersburg Medical Society gave an account of the chemical and therapeutical history of osmic acid, commencing with the discovery of the metal osmium in 1804 by the English chemist, Smithson Tennant, and concluding with his own observations made during the latter half of 1884 in the ambulance of the Imperial Philanthropic Society, when he employed injections of osmic acid in eight cases of trigeminal neuralgia, all of them severe, very obstinate, and of long standing. Of these cases five were cured, two improved, and one derived no benefit from the The formula used by him was—B. Acidi osmici, 0.1; sque dest., 6.0; glycerini chemice puri, 4.0. This he found kept well for two or three weeks; while the simple watery solution began to become brown in three or four days, and afterwards turned black, and was then useless. As one gramme costs four roubles (eight

shillings), being thus four times as dear as gold, it is of considerable importance to make use of a solution which will keep. The writer also found no dark specks in his solution such as are to be met with in that used by Neuber. The dose injected was at first five drops, afterwards more, the medium dose being eight drops. The only time when any unpleasant symptom occurred was in the case of a highly nervous lady who had been subject to epilepsy, and in whom the injection induced an attack of faintness very similar, in Dr. Schapiro's opinion, to the petit mal, and he suggests that with nervous patients the possibility of the occurrence of faintness should be borne in mind. The only case in which no improvement followed the treatment was that of a lady whose case was diagnosed by Professor Erb as hysterical neuralgia, and who suffered from severe pain in the neck and back of the head, and was believed to have some In her case a single injection was followed by central lesion. increased pain, and she refused to allow any more injections to be attempted. Dr. Schapiro not having observed any evil local effects such as were described by Leichtenstern (sanguineous bullæ, scabs, tedious boils) does not hesitate to inject under the skin of the face. He does not at present go deeply into the theory of the action of osmic acid, though he intends to study this experimentally; but he remarks that its most important action is to cause inflammation of the terminal nerve branches, its narcotic effect being of a secondary nature only.—Lancet, August 1.

THE USE OF OSMIC ACID IN NEURALGIA.—At the recent meeting of the American Neurological Association, Dr. G. W. Jacoby, of New York, read a paper on the subject of Hypodermic Injection of Solution of Osmic Acid in the treatment of Peripheral Neuralgia. He stated that Eulenberg, out of twelve cases so treated, had three cured, four benefited, and five unaffected. Dr. Jacoby used a 1 per cent. aqueous solution of osmic acid, injecting from half a gramme to a gramme. The injection produced a temporary smarting and burning sensation, and sometimes caused puffiness at the seat of puncture. Dr. Jacoby had treated eighteen cases, of which eight were cured, and some others benefited. Sciatics was particularly amenable, especially older cases. In one case injection over the radial nerve was followed by pain down the arm and paralysis. His conclusions were: "That in osmic acid we had a remedy which was of service in certain cases of peripheral neuralgia; its action, localised, was frequently beneficial; its use was not altogether free from danger; it was dangerous to implicate a motor nerve during the injection." Dr. Sachs, who spoke afterwards, had not experienced very satisfactory results; he had seen Eulenberg's cases. and believed that in about one-third no benefit was observed. But in some a cure was obtained when other measures, including electricity, had failed. Dr. E. C. Seguin attributed the results to counter-irritation, but Dr. Jacoby could not accept this explanation, and suggested that the known chemical action of osmic acid on nervetissue pointed to some more direct effects.— Lancet.

VENOMOUS STINGS.—A poultice of common salt (chloride of sodium) applied as early as possible to the part stung, and kept damp, is an excellent remedy for the stings of bees, wasps, etc. A carriage horse of my father's was stung by a wasp in the eye, and my mother applied the above, which gave such relief to the poor animal that ever after



he would come to her call, and, although a most difficult horse for others to catch, would allow her to bridle him with quite an affectionate submission. I have frequently experienced the healing qualities of this poultice, and have never known it to be tried without giving the most marked and immediate alleviation. This very simple and efficacious remedy is nearly always at hand; and if any of your readers try it beneficially it would be well if they would let the public how. C. B.—Garden Work, 24th April, 1886.

# MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST AND PREVIOUS MONTH.

Arndt (H. R.). A System of Medicine based upon the Law of Homosopathy. Edited by H. R. Arndt, M.D. 3 vols. pp. xx—2939. Philadelphia. (Hom. Pub. Company. 112s. 6d.)

Bermingham (E. J.). Practical Therapeutics. (New York. 15s.)

Blake (S. Jex). Medical Women: a Thesis and a History—(1) Medicine as a Profession for Women; (2) The Medical Education of Women. Pp. 270. Oilphant. Edinburgh. (Hamilton. 5s.)

Brown (J. G.). Medical Diagnosis. Illustrated. Pp. 285. (New York. 12s. 6d.)

Buck (A. H.). A Reference Handbook of the Medical Sciences. By various Authors. In 2 vols. Vol. 2. Illustrated. Pp. 814. (New York. 30s.)

Ebstein (W.). The Nature and Treatment of Gout. Authorised Translation by J. E. Burton. Pp. 194. (Baillière. 3s. 6d.)

Hamilton (A. McL). Manual of Medical Jurisprudence. Illustrated, Pp. 385. (New York, 15s.)

Higgens (C.). Hints on Ophthalmic Out-Patient Practice. 3rd edition. Pp. 112. (Churchill, 3s.)

Hofman (K. B.) and Ultzmann (R.) Guide to the Examination of Urine, with Special Reference to Diseases of the Urinary Apparatus. Translated and edited by F. Forothelmer. Pp. vi—251. (Cheinnati. 7s. 6d.)

Jessett (F. B.). On Cancer of the Mouth, Tongue, and Alimentary Tract: their Pathology, Symptoms, Diagnosis, and Treatment. Pp. 314. (Churchill. 10s.)

Klein (E.). Micro-Organisms and Disease: an Introduction into the Study of Specific Micro-Organisms. 3rd edition, revised. With 121 Engravings. Pp. 276. (Macmillan. 6s.)

Lane (W. A.). Manual of Operative Surgery. Pp. 280. (Bell and Sons. 8s. 6d.)

Lusk (W. T.). The Science and Art of Midwifery. Now edition, revised and enlarged. 8vo, pp. xviii—763. (New York. 25s.) Mackenzie (G. H.). A Practical Treatise on the Sputum. With Special Reference to Diseases of the Throat and Lungs. Pp. 112. (Johnston. 10s. 6d.)

Martindale (W.). Coca, Cocaine and its Saits: their History, Medical and Economic Uses, and Medicinal Preparations. Pp. 70. (Lewis. 2a.)

Ophthalmic Hospital Reports. Vol. 2 part I., pp. 102. (Churchill. 5s.)

Ostrom (H. J.) Epithelioma of the Mouth, New York. (Hom. Pub. Company. 5s.)

Ostrom (H. J.). A Treatise on the Breast and its Surgical Diseases. 2nd edition. New York. (Hom. Pub. Company. 15s.)-

Phillips (C. D.). Materia Medica and Therapeutics: Vegetable Kingdom, Organic Compounds, and Animal Kingdom. Pp. 1,990. (Churchill. 25a.)

Powell (R. D.) On Diseases of the Lungs and Pleura, including Consumption. 3rd edition. Pp. 510. (Lewis. 16s.)

Remington (J.P.). A Practice of Pharmacy: a Handbook for Pharmacists. Pp. 1,000. (Philadelphia. 25s.)

Reynolds (J. J.). Notes on Diseases of Women. 3rd ed. Pp. 110. (Churchill. 2s. 6d.)

Schech (P.). Diseases of the Mouth, Throat, and Nose, including Rhinoscopy and Methods of Local Treatment. Translated by R. H. Blackie. Pp. 300. (Hamilton. 98.)

Schussier (Dr.). Biochemical Treatment of Disease. 12th edition. Translated with the addition of a Repertory by J. T. O'Conner, M.D. Pp. 94. Philadelphia. (Hom. Pub. Company. 58.)

Semple (A.). The Voice Musically and Medically considered. With over forty Illustrations. Pp. 208. (Baillière. 3s. 6d.)

 Taylor (A. S.). A Manual of Medical Jurisprudence. 11th edition. Edited by T. Stevenson. Pp. 848. (Churchill. 14s.)

Treves (F.). A Manual of Surgery on Treatises by various Authors. Illustrated. 3 vols. (Cassell. 7s. 6d. each.) Winterburn (G. W.). Purpura. New York. (Hom. Pub. Company. 7s. 6d.)

### SHORT NOTES, ANSWERS TO CORRESPONDENTS, ETC.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester Road, South Kensington, S.W.

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, Lon-

don, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

JOURNAL PUBLISHING CLUB, NEW YORK —The Editor tenders his thanks for the back numbers of the North American Journal of Homeopathy.

#### CORRESPONDENTS.

Communications received from Mr. R. Metcalfe, London; Dr. Purdom, Croydon; Mr. G. A. Cross, London; Dr. Bernard Arnulphy, Nice; Major Vaughan Morgan; John Hos-Dr. Esq.; Martiny, kin. Dr. Shackleton, Brussels; London; Messrs. Leath and Ross, London; Mr. Ivatts,

Dublin; Dr. Wilkins Gutteridge, Bradford.

# BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische Zeitung.—Zoophilist. — Medical Advance.—Monthly Homoeopathic Review. - Revue Homocopathique Belge.-Homöopatische Monatsblätter.-New York Medical Times .-Homocopathist. American St. Louis Periscope.—Medical Current. — Clinique. — Medi-Visitor.—Chemist Druggist.—La Reforma Medica. — The Guide. — Revista Hom. Catalana.—Hahnemannian Monthly.—Bibliothèque Homocopathique. — Medical Era.—Medical Annals.—California Homeopath.—The Clinical Review.—Homœopathic Physician.—North American Journal of Homocopathy .-Homosopathic Recorder.—Medical Counsellor. —L'Art Medical. — Chironian. — St. Louis Medical Journal.—Medical Investigator. — Albany Medical Annals.—Homeopathic Journal of Obstetrics. — Clinical Review.—Southern Journal of Homoopathy.-Indicators vs. Book-keeping.—Purpura. By Winterburn. — Homœopathic Recorder.-Manual of Pharmacodynamics, by Dr. Hughes, 5th edition.—Publications of Massachusetts Hom. Med. Society.

School of walking

THE

# HOMŒOPATHIC WORLD.

JULY 1, 1886.

## THE INTERNATIONAL CONVENTION.

AFTER much negotiation it has been decided to hold the International Homeopathic Convention this year at Bâle in Switzerland. Belgium was originally chosen because it was both central and neutral; but the differences of opinion between Dr. MARTINY and his Committee on the one side, and Dr. Hughes and his Committee on the other side, proving insurmountable, it has been determined to make Bâle the Switzerland is neutral ground as well as meeting-place. Belgium, and is more central. Bâle is less easy of access for British homoeopathists, but for those from the Continentand it was expressly on behalf of our Continental brethren that the Continent was chosen for this year—it is much more generally accessible than Brussels. Italy, Austria, Southern France, and Spain are much nearer to Bâle than to Brussels; Paris is not much farther off; and America is about equally distant from most places on the Continent—a few hundred miles makes very little difference any way. Altogether the choice of Bâle, failing Brussels, appears to us the best that could have been made, and we hope our Continental colleagues will appreciate its advantages and come in force. The German Congress is to be held a few days later at Frankfort. It should be possible for many of those who are going thither to take Bâle on their way.

Dr. Brückner, of Bâle, has undertaken to find accommodation for the Congress at an hotel where members can both reside and have the use of a hall for their deliberations.

Dr. Hughes is endeavouring to get return tickets at single fares, a privilege which is usually granted to members of scientific congresses. We regret that we have to go to press before we can obtain all particulars on this head.

The programme will be somewhat as follows:

No papers will be read at the meetings, but précis of each in English, French, and German will be prepared and printed, and can be had on application to Dr. Hughes on the Monday (August 2nd) or later days. The meetings will be occupied with discussions.

On the first day (Tuesday, August 3rd) the discussions will be based on the Histories and Dr. Dudgeon's paper on the necessity for greater activity in spreading a knowledge of homosopathy. Dr. Theodore Kafka (of Carlsbad) has undertaken to prepare the history of homosopathy in the Austrian and German empires during the last five years; Dr. Vincent Leon Simon will do the same for France, Dr. Bushrod James for the United States of America; Dr. Clarke, with the assistance of colonial homosopathists, of the British Empire. Dr. Hughes has not yet received replies from gentlemen in other countries to whom he has appealed.

On the second day the first volume of the Cyclopædia of Drug Pathogenesy will be laid before the Convention as a claimant for the post of the "Materia Medica of the Future." The discussion will be introduced by papers from Dr. IMBERT GOURBEYRE, Dr. T. F. ALLEN, and Dr. HUGHES. After this Dr. CLARKE's paper entitled Notes on Nicotism will be discussed.

The third day will be devoted to Clinical Medicine, and among the papers to be discussed are—one from Dr. R. T. Cooper on *The Relation of Gout to Aural Disease*, one by Dr. Kafka on *Diabetes*, and one from Dr. Boniface Schmitz on *Psore-Meningo-Cérébrale*.

There will be a sectional meeting on Hygiene, at which a paper by Dr. Roth will be discussed.

Such is an outline of the fare prepared for the Convention. We trust it may prove eminently attractive, and we urge all those who intended to go to Brussels not to be deterred by the extra distance from meeting their colleagues at Bâle.

We may remark that before making the new arrangements Dr. Hughes took counsel of the British Homocopathic Society, and had a committee appointed him for consultation and assistance in judging as to the fitness of the essays.

# NOTES.

### THE HOMOSOPATHIC REVIEW.

WE learn with extreme regret that, owing to a fire at the printers', Messrs. Straker Brothers, the whole of the July number of our contemporary was destroyed. With admirable spirit editors, authors, and printers set to work to do what was possible towards retrieving the loss, and we have no doubt that the readers of the Homocopathic Review will have every reason to congratulate them on their success. But we are sorry to hear that it will not be possible to restore all the MSS. Dr. Goldsbrough, whose paper read at the last meeting of the British Homocopathic Society (and of which an abstract appears in our present issue) was among the lost, has been able to re-write from notes; but Dr. J. D. Hayward, whose prize essay on Hydrophobia also perished in the flames, had, unfortunately, not kept any rough copy of his work. We trust, however, that his memory may serve him well enough to enable him to give a useful summary of his essay if not to restore it entire. To all those gentlemen who have been thus put to such heavy loss and inconvenience we tender our heartfelt commiseration.

## ALLOPATHIC DEFEAT IN NEW YORK.

One of the favourite schemes of the allopaths in the United States is to secure the appointment of State Boards of Medical Examiners—to be composed exclusively of allopaths. The overt object of these Boards is to subject to a recognised test all medical graduates intending to practise in the State, and, considering the status of some of the American licensing bodies, this, on the face of it, is desirable enough. But it is perfectly plain that if these bodies were formed

exclusively of allopaths, invested as they would be with almost unlimited power, they would be under a temptation which no allopathic body has yet been able to resist to oppress the graduates of homeopathic colleges. The opposition to the proposed constitution of the New York State Board of Examiners has proved so strong that the Bill was ignominiously defeated. The probable result will be the creation of two State Boards, a homeopathic and an allopathic, each having the same status.

#### THE WAY TO BÂLE.

The three cheapest routes to Bâle (or Basel) are the Great Eastern, vià Antwerp, Brussels and Metz; the London, Brighton, and South Coast, vià Newhaven, Dieppe, and Paris; and the South-Eastern, vià Dover, Calais, and Laon. Second-class return tickets range from £4 17s. to £5 15s. 6d. If return tickets at single fares should be granted, this will be much reduced. We are glad to learn that arrangements will be made whereby members (with their ladies) will dine together daily sans cérémonie.

## THE HOMOSOPATHIC LEAGUE.

There has been very satisfactory progress during the month. The membership now approaches 300. The first of the series of tracts has been placed in the hands of the members, and three others will follow at once. The amount of interest that the question of homeopathy is exciting at present is evidenced by a correspondence now being carried on in a public print, part of which we reproduce in our present issue under the heading—The Appeal to the People.

## HOMOBOPATHIC DOCTOR IN BELFAST.

WE are pleased to learn from one of our correspondents in Belfast that this large and prosperous town has (after years of waiting) at last secured the services of a competent homeopathic physician. Dr. Brotchie, formerly of Liverpool and late of Canada, removed to Belfast early in May, and within three weeks after his arrival was busily engaged in extensive practice. Dr. Brotchie is a well-qualified

physician and surgeon, a firm believer in the truth and value of the homoeopathic law, and has practised our system for many years with marked success. His present address is, 96, Richmond Terrace, Great Victoria Street, Belfast.

#### HOMOGOPATHY SPREADING IN THE NORTH.

WE rejoice to learn from a northern correspondent that homeopathy is making steady progress in the North. Scotland has given to the system of Hahnemann many of its ablest supporters, but they have usually chosen the South for their sphere of practice. According to our correspondent, in the town near which he resides no chemist kept homeopathic medicines seven years ago, whereas they are now to be had from any of the four principal chemists. another town in Fifeshire-where there was only one chemist seven years ago who sold them, and he laughed at the people who bought them—they are now to be had at several chemists'. Even chemists in rural districts sell them now. Our correspondent (who writes sending a subscription to the Homeopathic League) concludes his letter as follows:—"I am convinced that the people only require to have some little experience of homocopathic medication in order greatly to prefer it to the other."

THE "LANCET" AND HER MAJESTY'S INSPECTOR OF EXPLOSIVES.

Her Majesty's Inspector of Explosives is evidently a man of some intelligence. In his last annual report he states regarding nitro-glycerine, or, as we call it, glonoine:—

"It may be interesting to record that the use of nitro-glycerine as a medicine has for the first time been recognised in the British Pharmacopœia, and that the substance made up into lozenges and solutions is now rather largely used, and, so to speak, authoritatively employed in cases of angina pectoris, etc., for which purpose it has hitherto been irregularly employed for some years."

The word "irregularly," which we have italicised, evidently refers to the use made of the drug by homeopathists before it was "discovered" quite recently by Dr. Murrell—an achievement for which he was presented by a sagacious French Society with a gold medal,—of which we hope he is properly proud. But the word "irregularly" and its evident meaning proved too much for the equanimity of the Lancet. It has been used in "legitimate medicine" and on "well-

established principles," cries the much fluttered journal, for the last six or eight years! Yes, Dame Lancet, it has been used on "well-established principles" any day these thirty years, since Hering and Dudgeon and others proved the drug. But the "well-established principles" are the principles of Hahnemann, and the "legitimate medicine" is that practised by Hahnemann's followers; and the fact that certain modern re-discoverers of established homeopathic truths have appropriated the drug, and that the British Pharmacopæia has sanctioned their action, cannot deprive homeopathy of the honour of introducing it into practice. Her Majesty's Inspector of Explosives appears to be well aware of this, and it is not likely that the perturbation of the Lancet will alter his opinion.

#### BEING FOUND OUT.

The following letter which appeared in the Medical Press, June 9th, is a sign of the times. We refer particularly to the latter part of it, which we have italicised, in which a demand is made for the authorities for the treatment Dr. Ringer recommends. "Justitia" must not be too sanguine about inducing Dr. Ringer to quote his authority. He has gone too far to do that. But though he probably never will acknowledge Hahnemann as the ultimate authority for "tips" which the Medical Times called "Ringer's," the growing intelligence of the people and general practitioners will eventually bring the secret to light. History will make short work of the Ringers, Murrells, and Bruntons, however large a figure they may seem to the ignorant to make to-day. Here is the letter:—

## THE NEW EDITION OF RINGER'S THERAPEUTICS.

To the Editor of the Medical Press and Circular.

Sir,—I observe among the "Literary Notes and Gossip" of your issue of May 26th an allusion to the curious phraseology of Ringer's Therapeutics. The image inadvertently raised in the reader's mind of a medical man employing Actes racemosa "with great success" in the other world is equalled in ludicrousness by the suggestion conveyed in the famous passage asserting that "tape-worms of all medicines taken by the mouth are best treated by santonin." In fact, the book abounds with similar involutions, in spite of the "literary assistance of my friend Dr. John Bird." The unintentional suggestion of a violent quarrel with the author conveyed by the phrase "my late friend Mr. Smith" is another instance, but the studied omission of sufficient particulars to enable the reader to identify the various "friends" to whom the author owes much of his information belongs to a different

category than mere literary carelessness. Not only is the real source of much of the treatment recommended not acknowledged, but a pretended history of the employment of some of the drugs introduced is often given which to the initiated reads much like an account of the play of Hamlet in which all reference to the Prince of Denmark has somehow been unaccountably omitted. Surely a little more frankness would do no injury to the author, while it would greatly enhance the esteem of many of his admirers, among whom is

Yours very truly,

The Riviera, June 1st.

A MODEST PROPOSAL.

Dr. Morrell Mackenzie, in his article in the June number of the Fortnightly Review, brings forward a very pretty scheme for the establishment and endowment of medicine just when the tide is running strong against establishments of another kind. He thinks the reason why the science of medicine makes so little progress is that doctors are too much dependent on their patients. We don't know how it would be with the science of medicine, but we can answer for it that it would be a very bad time for all unlucky doctors who happened to be afflicted with genius and independence of thought. And, again, when a troublesome patient no longer provided his doctor with the regular solatium of a fee, the temptation to the less scrupulou and more scientific and post-mortem-loving among the profession to adopt rough-and-ready methods would be very strong indeed. Dr. Mackenzie does not share "Professor's Huxley's expectation that a remedy for nearly all forms of disease will sooner or later be found in drugs." Dr. Mackenzie knows nothing of homeopathy, or he would be aware that Professor Huxley was merely prophesying after the event.

## MEDICAL MISSIONS IN CHINA.

THE British Medical Journal (June 12th) does not give a very cheering account of the success of medical work among the Chinese. Dr. McPhun says that "a very large proportion of the patients treated at the mission hospitals are suffering from diseases of the eyes, the most common being trichiasis, and granular ophthalmia with its consequences. The number of opium smokers treated at Swatow alone was 649; but the prospect of permanent cure is not spoken of hopefully. Many run away, unable to bear the misery of the first few days, and but few remain long enough to undergo a course of tonic treatment which is considered to

be essential." What a contrast is this to the report of similar institutions under homeopathy! Let our readers refer to the October number of the Homeopathic World for 1885 (p. 468), and read there the statistics of the Ningpo Homeopathic Hospital and Dispensary under the care of Dr. Barchet. Out of a total of 676 patients treated, only seven ran away, the rest remaining until they were cured. Let all those who think that homeopathists should adopt a laissez faire policy and tamely submit to extinction, reconcile their opinions with these facts—if they can.

# ORIGINAL COMMUNICATIONS.

#### THE APPEAL TO THE PEOPLE.

As an example of how ready the people are to listen to the advocates of homosopathy we have pleasure in drawing attention to a correspondence that has now been going on for several weeks in the *English Mechanic and World of Science*. It was initiated by a writer signing himself "A General Practitioner," and we cannot do better than give his letter as it stands. It was headed

#### DRUGS AND DOCTORS.

Your "thinking" readers may perhaps be willing to give some thought to one or two questions which I cannot get answered by men of my own profession. I do not know if in other professions besides the medical a system of "boycotting" questioners who seem to suggest any weakness in traditional faith is carried out; but certainly a young doctor like myself can get no help from the profession in certain directions, so I take the liberty of writing to you the remarks which are not permitted to be published in the medical journals, and which, for some reason which I am utterly unable to comprehend, are thought to be unprofessional by one's brother doctors.

Dr. Wilks asked a large and representative meeting of medical men

not long ago the following rather startling questions:—

"How many medicines are given in these days from a knowledge of their action? I mean, when all of us, without exception so far as I know, write down on a piece of paper, measuring 6in. by 4in., some drug for every trouble with which a patient presents himself, would it not be rather difficult for us to always give a good reason for our action? Some drugs retain their fame, but they are probably valueless, and are used according to some action which accords with a purely imaginary notion of the nature of the diseases in which they are used?"

Plenty of other men, Sir Andrew Clark amongst others, have ex-



pressed their belief that the art of healing by medicines is not progressing, and some go so far as to say that they do not believe

medicines are of any use at all.

Now, as I quite agree with these, my betters, and though I am young, still, twelve years of very hard work have taught me that the therapeutics I learned at my hospital were not worth the name of the science. I cannot be content to go on in the routine of prescriptions which orthodox practitioners consider quite sufficient, so long as one's daily list of patients is a fairly long one, and as anxious thought has led me to seek, and find, another way of treating the sick, which proves to be far more successful, and to be governed by a definite rule of drug selection, in the same way as a large number of practitioners have done, though they form a minority in the profession, I feel myself justified in putting questions upon points which have led me to so satisfactory a result; but, as I said before, the minority, who want these points fairly and impartially examined, are "boycotted,"

and have their questions suppressed by the majority.

I cannot tell whether others have followed the same train of thought as myself; but at the outset I cannot help asking, Have we doctors been on the wrong track for nineteen centuries? putting aside the mere routine of empirical prescriptions which are simply given because they seem to have done good to somebody else. When we come to the more exact method, that in which we attempt. as doctors have attempted for years past, to suppress or destroy the symptoms of disease by opposing to them such drugs as act upon the body in an "antipathic" direction, are we not doing utterly wrong? The minority of medical men, with whom I sympathise, find that every drug when taken by a healthy man produces in him a series of symptoms which closely correspond to the symptoms called forth by different diseases in a previously healthy man. Why is it wrong to try and use this fact? There must be some reason for it, and there must be some link, in the form of a law of nature, which connects together drug symptom and disease symptom. If we think we have found that law, why may we not say so, and use it, and ask the majority to examine it fairly?

What are disease symptoms? What do they mean? Are they not all we can grasp of the mysterious and imperceptible "dynamic" force—"disease," as we call it? No doctor knows what disease itself is. He sees, hears, and otherwise perceives certain symptoms; his patient can tell him of others which are imperceptible to the doctor. What are these symptoms doing? We all believe that there is in every human body a natural tendency to recover health, if possible. Are not these symptoms very probably the perceptible effects produced by these natural efforts? And little as we can understand them, are we doing right when we seek to put in their place another set of disorders produced by a drug? Here is nature making an effort which is in a certain direction—we believe it is towards recovery; we then proceed, according to "orthodox" medicine, to give a drug, the effect of which is to produce results showing that we have forced nature to make efforts in a fresh direction, and if we give enough of the drug we shall succeed in causing the patient to show more of the symptoms due to the drug than of those due to the disease—in fact, we do what we expected to do, we suppress the disease symptoms; but is not this all wrong? With our limited knowledge of the minute and funda-

mental changes which natural efforts are setting up in their efforts to recovery of health, thereby producing these symptoms, can we safely and confidently proceed to try and abolish those symptoms and suppress those changes with a contrary acting drug?

May we not be actually hindering recovery by such a proceeding? Now we know just as little of the exact nature of the dynamic forces at work when a drug produces certain symptoms in the body of a healthy man as we do of these disease efforts. Yet, may we not believe that they also act upon definite lines, causing efforts of the

natural system very similar to those which start in disease?

Under such impressions as these, I first began to give patients drugs which I knew would help the natural efforts which were producing the disease symptoms I wished to cure—that is, selecting a drug which, in experiment upon myself, or in experiments I had read of, I knew produced in health those identical symptoms. Supposing that these drug symptoms mean that the drug is capable of causing natural powers to move in the same way as they were doing in the case of disease before me, and that I believed to be towards recovery, if possible, I gave that drug alone, with the result at first of sudden and decided aggravation of the symptoms, followed by rather rapid recovery. This being hopeful, I reduced my doses very much, and time after time had the satisfaction of seeing my patients recover immediately, with no aggravation of symptoms, and recover in the early stages of disorders which I had been taught must run through a set series of stages. In this way, again and again I have seen acute inflammation of the lungs cease before the second and dangerous stages should have come on, because phosphorus, which inflames the lungs in experiments, was administered in small doses; and by means of drugs chosen according to this law, I have seen cases recover whose symptoms would have completely puzzled me under orthodox medicine. I did not know what they meant, but I knew a drug which was a similar, and so gave it a cure at once.

Will your thoughtful readers tell me why is it so improbable that these things are true?—for such is the verdict of the majority of the profession; in fact, in their eyes it is all utterly contemptible. Why?

A GENERAL PRACTITIONER.

In reply to this several letters appeared the following week from both medical and lay correspondents, some in favour of and some against homeopathy, and some entirely sceptical as to the value of medicines at all. Letters from "A General Practitioner" and Dr. Pope appeared the week after :---

#### DRUGS AND DOCTORS.

I am well satisfied that my letter of May 7th should have produced communications from two gentlemen who go with me, in so far, as they both admit the truth of the law of similars a truth which, as I am well aware, was first enunciated by Hahnemann 190 years ago, but which I do not imagine is so universally admitted to be a truth as these gentlemen seem to think.

Both S. Bottone and "M.D." have completely-I do not say

wilfully-misunderstood my letter, and, in lieu of reply, have sought to bring home to me the egregious egotism and ignorance of laying claim to the discovery for myself of the law of similars, commonly known as homosopathy, an accusation which I should have thought too ridiculous to make against any one. Such a claim was, of course, far from my thoughts. My letter simply gave the reasons why, discontented with the therapeutics taught me as a student, and supporting such discontent by a quotation from the words of an acknowledged physician of high repute, I, having been led to inquire into another system-i.e., homoeopathy-was desirous of knowing, first, whether in any other profession than the medical a system of boycotting questioners who seem to suggest any weakness in traditional faith is carried out? Second, whether it is wrong to try and use factsproved to be facts by experience, but ignored by those to whom the profession has been in the habit of looking for guidance? S. Bottone completely misses my meaning when he speaks of my "cool assumption that certain drugs would help the disease actions towards recovery." He surely does not think that I claim any priority in homosopathy when I say that, "after knowledge gained by converse with men high in the ranks of the homosopathic school, and careful study and experiment of the effect of drugs on the healthy body as set forth by these men, and in homoeopathic literature, I first began to give my patients drugs upon this theory." What I intended to convey was that, at a certain period of my inquiry, "I first"—that is, for the first time in my life—began this application of my fresh knowledge, and finding, after a thorough and conscientious trial of some years, that, in my judgment (S. Bottone will perhaps allow me to be so far persuming as to say that I have a judgment—that I am capable of reasoning to a certain extent) there was a law of drug action here which, if I followed it, would dispel my previous anxiety and discontent, whether it was not rational to follow up the inquiry?

Notwithstanding the assertions of both S. Bottone and "M. D.," I maintain, for I know it from personal experiment, that the profession as a body are not open to receive the truth, if it comes in support of homeopathy; and that however successful or new may be the treatment of cases, if they are treated by the selection of drugs avowedly chosen according to the homeopathic law, no medical journal will publish them, and the majority of the profession will not believe in or listen to the suggestion of the possibility of the truth of homeopathy.

The subject is one which is utterly forbidden, and to declare one's faith in homeopathy is to forfeit at once all claim to professional I firmly believe that, if a professed countenance and respect. homocopath were to discover through the application of the law of similars specific and successful cures for cancer, consumption, and epilepsy, an announcement of those cures, if accompanied by a claim that homosopathy had discovered them, would be received with utter contempt by the bulk of the profession. Time after time have offers been made by the committee and staff of the London Homeopathic Hospital to submit their theory to fair and open trial, at their own expense, before the whole profession in the wards of our general hospitals, and as often have those offers, honestly and courteously made, been refused with contempt, and this in spite of the stastistics of homocopathy being far in advance of those of the old school. This latter statement I can prove by accurate quotations of facts in detail,

if required by S. Bottone, "M. D.," or any one else. And, I ask, shall we ever get nearer to the truth or falsehood of homosopathy so long as the majority of the prevailing school refuse even to submit it to fair trial? "M.D." brings forward the mechanical removal by castor oil of an irritating substance which is causing diarrhoea as an instance of how doctors all admit hom copathy to be true. To begin with, this proceeding is not homoeopathy any more than the use of an enema for the same object would be, or the removal of a thorn from the flesh, or any other surgical proceeding. And, besides, I do not believe that the majority would allow that they used homoeopathy thus; they would be wrong if they did. S. Bottone denies that remedies producing constipation are used to check diarrhoes. If there is no irritant to be removed by castor oil, I maintain that nearly all doctors, except homoeopaths, do use astringents to check diarrhoes, and, moreover, that they produce thereby subsequent constipation. Whereas the laws of similars gives us, at least, 27 remedies, which act beautifully and rapidly in curing each a particular form of diarrhosa such as each causes in health, and without producing subsequent constipation, S. Bottone gives two drugs-ipecacuanha and antimony, both of which cause in health, among other effects, irritation and inflammation of the mucous membrane of the bronchial and smaller tubes of the lungs, with consequent free expectoration, and says doctors use these to help just such states of disease. I know they do, and that the success of these remedies depends upon their accurate homoeopathic action; but no orthodox doctor will admit that such a suggestion is anything but humbug. As to his statement that "we" are progressing, how does Dr. Wilks' remark hear out such an assertion? And this quotation is only one picked out from plenty of others, which I could produce, uttered by great physicians when speaking of therapeutics.

Homeopaths, many of them highly-educated gentlemen and physicians, are refused election in our medical societies; their writings and labours, their successes and offers of fair examination, are ignored with contempt by the majority of the profession. What course then is open to a man who conscientiously believes that homeopathy is true? I see none for myself, except to hold fast what I believe, and to accept the separation from the ranks of the profession which I so much love. As "M.D." says, "homeopathy has been so long before the profession and the public that they have now had plenty of time to consider it." But how can they consider what they will not even look at, and what is the natural consequence of prejudice so unreasonable and unmeaning? Rather than yield their belief in what they know to be true, men are thus forced to take a sectarian position which they detest, form societies for themselves, effectually to carry out their investigations, and otherwise act in a manner disagreeable to themselves and injurious to the interests of the general public.

Personally, so convinced am I of the truth of Hahnemann's law

Personally, so convinced am I of the truth of Hahnemann's law (excepting that part of it which deals with the minute dose) that rather than cease to use what has given me interest and confidence, in the place of despair and anxious uncertainty in my work, I would give up my profession entirely, and join the ranks of "the unemployed."

A GENERAL PRACTITIONER OF MEDICINE.

· Some one has been good enough to send me copies of your

very interesting periodical! for the 7th and 14th of May, drawing my attention at the same time to p. 216 of the former and p. 239 of the latter. In the one I find a letter from "A General Practitioner" on "Drugs and Doctors," and in the other two communications purporting to reply to the first. If your space will admit of it, I should like to make a few remarks on this correspondence in your next issue.

In the first place, I notice that "M.D.," while admitting that there is some merit in the theory "similia similibus curantur," does "not consider the pages of the English Mechanic the proper place for a medical man to point out its demerits." Possibly so, for there is no necessity for a medical man to go outside the professional journals to do this; but, on the other hand, the English Mechanic is a very proper place in which to draw attention to its merits. This for two reasons: 1st, because no medical journal will admit any article in which either the nature of homosopathy is explained, the evidence of its truth set forth, or its advantages described; 2nd, because men who can read with interest such a journal as yours must be men of a thoughtful turn of mind, accustomed to deal with facts, and to search for truth in the field of physical science in such a manner as to render them better qualified than most men of education to appreciate the

facts adduced in evidence of the truth of homosopathy.

Your correspondent, "A General Practitioner," is evidently one of a large and increasing class of medical men who are daily searching for more light on the best methods of prescribing drugs. Dr. Wilks and Sir Andrew Clark, with many others who might be mentioned. have satisfied themselves that because they have found drugs to be of little service in the treatment of disease, therefore they cannot be prescribed with any advantage, except, as Dr. Moxon once said, "as aids to faith in the weary time." While accepting the conclusion of Dr. Wilks that, as ordinarily prescribed, medicines are of little or no use, your correspondent and others like him are not fully persuaded that there is no better way, and are anxiously looking for it. In his researches, "A General Practitioner" has been led up to homeopathy, just as Dr. Reith, of Aberdeen, was nearly twenty years ago by his study of the action of digitalis on the heart. He now finds that he is not permitted by the press of his profession, by the medical societies to which he probably belongs, to state publicly what he knows to be true. He may treat his patients homoeopathically if he likes; but if he tells his medical brethren that he does so he must submit to be "boycotted." The Irish tenant who resolves to be honest and discharge his just debts is "boycotted" by the knaves who live around him. The medical man who admits, who acknowledges, that he prescribes medicines homocopathically, is likewise "boycotted" by his neighbours, who, though they may oftentimes do precisely the same as he does, insist on denying that they do anything of the kind. "M.D.," in replying, states that "any new remedy, or any better method of administering it for any disease," will readily be inserted by the medical journals. There is a certain amount of truth in this, too; but let any one endeavour to point out a therapeutic principle or doctrine (Dr. Wilks denies that anything of the kind exists) which shall lead to the discovery of remedies in all forms of disease that are curable, and in many that are now regarded as beyond the reach of art, and he will be shut out from all opportunity

for doing so in the medical press. And not only so, but the medical press will print in the boldest of type the most glorious misstatements of homoeopathy, and the editors thereof will decline emphatically to publish any reply thereto. So lately as last November Dr. Dudgeon addressed a letter to the Lancet pointing out the mistaken notions regarding homosopathy which appeared in its leading columns of the 28th of that month. Notwithstanding that this journal heads its correspondence columns with the motto, Audi alteram partem, the letter was not inserted, but a note was printed in which the editor said: "We see no good to be done by any lengthened discussion of the principles of Hahnemann. Medical practitioners and cultivators of medical science have too much real work on hand for that to be profitable." Further, the medical journals refuse to insert advertisements of books on homocopathy! Messrs. Macmillan and Co., the proprietors of the Practitioner, quite recently declined to allow an advertisement of Ameke's History of Homeopathy to appear in their journal! They declined on the ground that they "must consider the feelings of a large section of our readers, who would certainly feel irritated by the recurrence of an announcement of the work, and for their sakes we must decline to advertise it." If instead of "for their sakes," Messrs. Macmillan had written "for the sake of their subscriptions," they would have been nearer the truth, I imagine.

The open teaching of homosopathy is, therefore, thoroughly "boy-cotted;" not so the inculcation of facts derived from this teaching, however. This is, to my thinking, the most extraordinary feature of the opposition homosopathy meets with from the medical profession. For example, Dr. Lauder Brunton, in his recently-published treatise On Pharmacology, says at one part, in reference to homosopathy, "The adoption of any such empirical rule must certainly do harm by leading those who believe in it to rest content in ignorance, instead of seeking after a system of rational therapeutics." Then turn to "The Index of Diseases and Remedies" at the end of this volume, and there you find, or, at any rate, any one familiar with the practice of homosopathy will find, that more than fifty per cent. of the medicines advised for internal use are homosopathic to the conditions in which they are advised, and were first made known to be remedies in such

conditions by medical men practising homeopathy!

Why this "conspiracy of silence"? Why this persistent poohpooling of a fact so thoroughly demonstrated during the present century? Why this boycotting of those who avow its truth and their knowledge of it? If homocopathy were not true, Dr. Brunton's book could not have been written, neither could that other popular manual

of therapeutics by Dr. Sidney Ringer.

These are facts which the public ought to be made aware of. It is their interests that suffer by medical men being prevented from studying homeopathy, by its being either kept from their knowledge or misrepresented to them. When I first became acquainted with homeopathy, now thirty-five years ago, the opposition was much more violent and abusive than it is to-day—now it is a process of sapping and mining that is going on to hinder its progress. But the more such facts as I have stated are known, the more ineffectual will these secret machinations of the enemies of therapeutic advancement

become, and therefore I venture to ask you to allow me to make them known through your columns.

ALFRED C. POPE, M.D., M.R.C.S.,

Ed. Monthly Homocopathic Review.

Tunbridge Wells, May 17th.

The next week the following letter appeared among others :--

### DRUGS AND DOCTORS-A TEST CASE OFFERED.

Being deeply interested in the argument, "Drugs and Doctors," I would willingly (and selfishly, of course) submit myself as a test case, and, to a great extent, settle the question among our readers. Being a sufferer from severe brain irritability, caused by dyspepsia and over-study, and having exhausted all allopathic means, and being s comparatively young man and not an invalid, there is a fair field for work. DOUGLAS.

And the week after a writer signing himself "H. A."

offered himself in the same way.

On June 4th "A General Practitioner" had this letter, giving excellent reasons for declining to let the truth of homocopathy be staked on such a test:—

#### DRUGS AND DOCTORS.

Here, in the letter of "Doctor Medicinee," we have a plain statement of the real state of the case—namely, that the profession condemn the belief in and use of the law of similars as "rank quackery," without even an attempt at examining whether it be true or not, for alas! "the ethics of our profession do not sanction discussion."

If examination and discussion are forbidden, how can the profession come to the conclusion that those who have examined this matter, and believe in the law, are, in using it, practising "rank

quackery "?

"Doctor Medicinæ" says, for "good reason" the profession hold this opinion. I have never heard what that good reason is; and my object in commencing this discussion was to discover that reason.

The books of Ringer, Brunton, and other patient investigators of the practical application of drugs are sanctioned by the profession, and their suggested treatment is used with perfect freedom; and yet those books are full of applications of drugs, whose only link with the disease is that they cause in health exactly the symptoms they are

found to relieve when occurring in disease?

I fear that the "good reason" is this: that professional men in the past, having once said that homoeopathy is "rank quackery" although they now practise according to its teaching—are committed to an opinion from which they have not the courage to retreat, and are carrying on this system of boycotting in order to prevent any one from having an opportunity of ascertaining for himself the falsehood of the assertion.

"Sceptic" is no doubt quite right so far as his method goes; but would his system help him if he had pneumonia, enteritis, or cholera for example, and in all of these diseases homocopathy can show most

encouraging statistics?

There are thousands of persons who, like "A Working Man," most gratefully use the knowledge which the discovery of the law of similars gives them, and who, having this knowledge, often attain to greater success in treating disease than do those who throw away this precious knowledge without even pausing to examine its claims.

precious knowledge without even pausing to examine its claims.

"Douglas" is the man for "Sceptic's" treatment. Young, not an invalid, knowing well the causes of his illness, let him follow "Sceptic's" advice; shun the mistakes which have led to his illness, and live a different and natural life. Personally, I would not consent to prescribe for "Douglas," who gives us a very vague diagnosis, which may mean anything, without any account of the symptoms which lead him to so curious a conclusion as that he has "severe brain irritability." If such really is the case, let him rest his brain and his stomach, which he says is also irritable; but we cannot prescribe for a man we have never seen.

No isolated "test case" is of any avail; the true test is to examine the statistics of the rate per cent. of recovery and mortality of many thousand cases, extending over, say, five years, under homoeopathic treatment, and compare them with a like number of cases under allo-

pathic treatment.

Take, if you wish, one disease, a universally severe one, say cholers, and examine the statistics of the two modes of treatment during severe epidemics. I venture to say that "Doctor Medicines," had he so acted, would have hesitated before he applied the term "rank quackery" to the practical use of a law which has led men to such advanced success as those statistics will show him.

A GENERAL PRACTITIONER OF MEDICINE.

On the same date appeared a second letter from a writer signing himself "M.D.":—

#### DRUGS AND DOCTORS.

As I understand it, the position of the regular practitioner towards homeopathy is simply this: Homeopathists profess to cure diseases in accordance with a certain theory (whether they always do so or not is another matter); the ordinary practitioner declines to bind himself to any theory. If a man says, and leads the public to believe, that he treats diseases according to the homeopathic method, I consider he is bound in honour to treat them by that method, and no other. But while I believe that some medicines act in accordance with this theory, I just as firmly believe that others act differently. Astringents will cure some cases of diarrhea, and that without causing subsequent constipation, a "General Practitioner's" assertion notwithstanding.

So far as my education, my subsequent perusal of medical journals, and my intercourse with other medical men have taught me, the ordinary practitioner does not care whether the remedy he prescribes acts homeopathically or allopathically, or whether he has no idea in the world as to how it acts, if he only knows that it will cure the disease. He does not care whether the remedy has been discovered by the advocate of any particular theory or by any old woman who

has been in the habit of collecting herbs by the roadside, wherewith to physic her neighbours, so long as he knows by experiment that it is a remedy. If this be the truth (as I believe it is), why should not a Ringer or a Brunton, if they find by experiment that certain medicines recommended by so-called homeopaths are really valuable, why should they not recommend them to the notice of their fellow-practitioners? I admit that a homoeopath may discover valuable remedies, in the same way as I admit that an old woman, a Hottentot, or a heathen of any description may do so. They have discovered valuable remedies, and I say he would be a fool who would refuse to employ them, because they were, or were not, discovered according to a particular theory. I deny that medical men are "prevented from studying homoeopathy," as Dr. Pope asserts; they are free to study anything and everything that has any likelihood of alleviating or curing disease. I deny, moreover, what is stated by "A General Practitioner "-that "they will not even look at it." I say without fear of contradiction that they have not only looked at but have studied it for the last eighty years, and have come to a decision as to what it is worth, and I think that decision is correct.

Homeeopaths have long ago given up one of the fundamental principles of Hahnemann-viz., infinitesimal doses; if they will only go a little further and admit that some medicines act in a manner which cannot be considered according to the law of similars, then nothing remains of homocopathy but the name, and even that has been advised to be dropped by a homoeopathic journal. In the Lancet of Sept. 15, 1883, appears the following extract from the Hahnemannian Monthly:-"A few years ago the editors of the New York Medical Times dropped from the title of their journal the distinctive word 'homosopathic;' now they boldly urge the renunciation of the word as applied to our school of medicine. If we are emancipated from the thraldom of sect, we shall not only save our school from imminent dissolution, but shall also become an integral part of the medical profession of the day, honoured as true, broad, liberal, progressive physicians. But if we cling to a name which by no means represents the catholicity and spirit of the new school, we are doomed to annihilation; and more, we become the common enemy of all allopaths,

and also of all progressive homoeopaths, etc."

Are we any nearer this consummation now than we were in 1883? I hope so. In the mean time, let me advise "A General Practitioner" to avoid assuming the name homoeopath. Let him treat his patients as he finds best, and not bind himself to any one theory, and there will be no reason for his leaving the ranks of the profession he so much loves, nor, I hope, joining the ranks of the unemployed.

# To this, on June 11th, Dr. Pope replied as follows:—

#### DRUGS AND DOCTORS.

The correspondence under this heading in the "E. M." of 4th inst. induces me to trespass once more upon your space to consider a few of the ideas set forth in some of the letters.

First of all, as to the position of the medical man who practises homeopathy openly. "M.D." very judiciously qualifies his definition of this position with an "As I understand it," and then says,

"Homeopathists profess to cure diseases in accordance with a certain theory (whether they always do so or not is another matter); the ordinary practitioner declines to bind himself to any theory. homoeopathist is a medical man who has adopted homoeopathy into his practice; who believes that wherever it is possible to find a drug which has been proved to produce a similar condition to that constituting the disease he has to treat, in it he will find that medium which will most surely, most safely, and most certainly prove reme-He is bound by no other obligation than that which binds all medical men—viz., to do the best within his knowledge to promote the recovery of those who consult him. Experience has taught him that when he can prescribe a medicine which is homoeopathic to his patient's case, he is, so far as the administration of medicine is concerned, most completely fulfilling this obligation. When he cannot do this, either from the nature of the case he has to deal with or from imperfect knowledge of the materia medica on his part, he is still bound by the same obligation to do that for his patient which is best within his knowledge. "M.D." asserts that "if a man says, and leads the public to believe, that he treats diseases according to the homeeopathic method, I consider he is bound in honour to treat them by that method, and no other." Here "M.D." is utterly in the wrong. The homeopathist is, as I have said, bound only to do the best he can for his patient. This "best," he openly confesses that he believes will be derived from homoeopathy, if he can derive it; but as Mr. Giles, of Auckland, N.Z., said in a letter published in the Homocopathic Review (1866), in reply to a pamphlet entitled The True and False Sciences: a Letter on Homocopathy, "Though I am a homocopath, I do not regard our law as an 'absolute law,' in the strict sense of the term. It is the first and best rule of practice that I know of, but common sense tells us that there are cases in which it is not applicable. There may be incurable cases in which pain must be relieved by opium, poisons be removed by emetics, and perhaps in wounds of the intestines, the parts must be kept at rest by large doses of opium. The formula Similia similibus curantur is not a prison, but a high We may be compelled to deviate from it sometimes; but we do so with reluctance and return to it with alacrity."

As a practical fact, the nearer a medical man keeps in prescribing medicines to such as are homoeopathic to his patient's condition, the more successful he is in the treatment of disease. And just as the physician who, in the early part of this century, believed that Brown's doctrine of stimulants was the best basis for his therapeutic method was called a Brownonian, and as, towards the middle of it, the physician who held in equal esteem the depleting and starvation doctrine of Broussais was called a Broussaisist, so the physician who to-day believes that homeopathy furnishes "the first and best rule" of drug selection in prescribing is called a homoepathist. The word

homeopathist defines a con-fession, not a pro-fession.

"The ordinary practitioner," says "M. D.," "binds himself to no theory." Dr. Wilks, of Guy's Hospital, tells the ordinary practitioner most distinctly and emphatically that "there is no doctrine in therapeutics;" that, in fact, he has no theory to guide him in prescribing; that all drug-medication is pure empiricism. In fact "M.D." says that he does not care how a remedy acts! All I can say is that, in my opinion, he ought to care, and that if the treatment of

disease is ever to be any other than "that department of medicine of which we know least," as Dr. Smith described it at the British Medical Association meeting at Belfast, or unless "the function of curing" is, as Dr. Mackenzie puts it in the Fortnightly Review for this month, to remain that in which "we have made comparatively little headway," he must care, and all medical men must care. It is simply because those who have had experience of the homocopathic method feel the importance of this caring that they are so earnest in, and constant in, pressing homosopathy upon the attention of their medical brethren. One of your correspondents, who appears to be of a singularly commercial turn of mind, regarded the opening of this correspondence as an endeavour to advertise homocopathy. Homocopathy needs no advertising; but the art of medicine sadly needs that it should be investigated by medical men. The general public are far in advance of the profession on this subject. It is practitioners, well-informed practitioners, that are wanted, not patients; they are numerous

enough in every town.

"M.D." asks if "a Ringer or a Brunton, if they find by experiment that certain medicines recommended by so-called homosopaths are really valuable, why should they not recommend them to the notice of their fellow-practitioners?" This is not the question at issue. They ought to recommend them; but they ought, at the same time, to tell them how they had been found to be remedies in the conditions in which they recommend them. They have no right—and but for the dread of boycotting neither would dream that he had such a right —to put them forth as original observations. One reviewer of an early edition of Dr. Ringer's book (I think it was the Dublin Medical Journal) plainly asked the author where he had found so many novel applications of medicines! Another—the British and Foreign Medico-Chirurgical Review-denounced the whole category as "flat homecopathy!" Again, this method of stating that so and so is good in such and such, apart from the doctrine that suggested that it would be so, is likely to be mischievous, and to give rise to disappointment; it is so for the simple reason that it is only cases of a given form of disease, the symptoms of which resemble those the medicine named will produce, that will be benefited by it. For example, Ringer states that drop doses of ipecacuanha wine will cure vomiting. So they will, when the vomiting occurs in a condition resembling that produced by ipecacuanha, but not when it is like that produced by arsenic, or apomorphia, or cocculus indicus, or bichromate of potash, or many other medicines. Empirical homoeopathy is one thing, scientific homoeopathy is another. The former is a great improvement upon the treatment of diseases as commonly carried out, but the latter is still far superior, because more exact, more precise, and more uni-Scientific homoeopathy, however, cannot be formly successful. taught by Dr. Ringer or Dr. Brunton, because, owing to the boycotting, to teach it would be as much as their professional positions are worth!

"M.D." again says, "I deny that medical men are prevented from studying homoeopathy, as Dr. Pope asserts." "M.D.'s" denial to the contrary notwithstanding, I think that I showed in my letter pretty fully that medical men were prevented from studying homecopathy, if not directly, at any rate indirectly. The journals that circulate amongst them refuse to present to them any facts tending

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to support it; they persistently misrepresent it; the medical publishers decline to advertise books explaining and illustrating it; were a hospital physician to test homoeopathy openly in his wards, he would be deprived of his office; were a lecturer at a medical school to explain homeopathy fairly and fully to his class, he would be instantly got rid of; were a medical practitioner to tell his medical brethren that he had examined homoeopathy, tested it at the bedside, and had seen reason to believe that it was true, he would be "cut" by every one of them! This is a free country, and to prevent a medical man studying homosopathy by Act of Parliament is of course impossible; but the modern weapon of boycotting is practically as effective. It is the exercise of this that I state prevents a medical man studying homeopathy. Your correspondent says that medical men have looked into homoeopathy and have studied it, and have come to a decision as to what it is worth. What that decision is worth he does not say. I think that I have read nearly, if not quite, every book, pamphlet, and article written against homeopathy in this country since Dr. Alexander Wood's "Homocopathy Unmasked" was published in 1847 or 1848 down to the latest reference to it in the Lancet and British Medical Journal, and I can safely say that, with one exception, that of Dr. Rogers, not one of these writers has had the slightest practical experience of homocopathy; and with the exception of Dr. Rogers and Dr. George Balfour, not one had watched the homoeopathic treatment of disease by others. In no instance was homoeopathy understood; in all it was misrepresented,whilst among medical men with whom I have spoken on the subject, I have uniformly found the densest ignorance of its meaning. One gentleman, of high professional position, remarked to me at the close of an introductory lecture at the London Homeopathic Hospital, "I had no idea that there was so much to be said for homeeopathy."

I had intended to have pointed out the errors of Mr. Bottone; but I have already exceeded any reasonable amount of space, and I must therefore be content to express my opinion that he is mistaken in nearly every assumption he makes, and could easily be proved to be so.

Alfred C. Pope.

Tunbridge Wells, June 7th.

As it seemed to us that the challenge thrown down might be accepted, and though the result, whatever it might be, could not be regarded as conclusive, it might still be taken for what it was worth, we wrote the following letter:—

### DRUGS AND DOCTORS—THE CHALLENGE ACCEPTED.

Your correspondent, "General Practitioner," is quite right in refusing to prescribe for "Douglas" on the strength of the meagre description of his case given in your columns, and he is also right in intimating that prescribing for persons one has never seen is less satisfactory than prescribing for patients before us. Still, it is possible, and I have myself frequently prescribed for persons I have never seen, and with the happiest results; and although single cases in themselves prove little, they have a certain weight, nevertheless, and help to make up the broad statistics on which the ultimate verdict must rest. I shall, therefore, in default of any one else

coming forward, be happy to treat homoeopathically both "Douglas" and "H. A.," if, in case they cannot call upon me, they will send me a full and detailed account of their medical history and present condition. When the treatment is complete I will, with your permission and theirs, explain its rationale in your columns, and leave them to tell you its results.

If you will allow me, I should like to add a word or two in reference to the letter of "M.D." in your last issue. He says that the orthodox section of the medical profession have "studied" homeopathy for eighty years. No doubt they have. They have "studied" it, like "M.D." himself, in the pages of the allopathic journals, such as the Lancet, and, like "M.D." they have been led—not very unwillingly, as it seems—by that not too scrupulous and by no means unprejudiced journal, to imagine homeopathy to be the grotesque thing "M.D." describes.

"M.D." tells us that all his culture, erudition, and experience lead him to believe that "the ordinary practitioner"—under which term I presume he includes himself—"does not care whether the remedy the prescribes acts homeopathically or allopathically," so long as it acts. This is a poor compliment to the "ordinary practitioner." Imagine a joiner who should be indifferent as to whether he drove his screws home with a screwdriver or a hammer so long as he got

them in!

"M.D." admits that Brunton and Ringer have helped themselves largely to the fruits of homeopathists' labours, and he thinks that they would have been fools not to have done so. It does not matter, says "M.D." in his delicate way, whether the discovery has been made by a homosopath, an old woman, a Hottentot, or any other heathen. Well, that may be so; only let those who borrow be honest and acknowledge their debt. Let them not, whilst trading on the names of "orthodox" and "regular," present their readers with the lore of old women, Hottentots, and homoeopathists, giving no hint as to who are their teachers; but this is their usual waya way which "M.D." seems to approve. Dr. Brunton, whose "Index of Diseases and Remedies" in his recent work reads as if copied straight from a homocopathic textbook, not only fails to acknowledge the source of his inspiration, but even stoops to the petty persecution of those to whom he owes so much. Debtors are apt to hate their creditors. Dr. Brunton edits the Practitioner, and he recently upheld his publishers in refusing to insert an advertisement in his journal of Ameke's History of Homocopathy, edited by Dr. Dudgeon. I send for your perusal a pamphlet by Dr. Dudgeon, entitled Medical Boycotting, containing a correspondence on the subject between himself, Dr. Brunton, and the Messrs. Macmillan.

As I have the honour to be the London correspondent of the New York Medical Times, I know something of that journal, to which "M.D." has made reference. It has endeavoured to disarm the epposition of the old school towards homeopathy; and I shall be able to tell my American readers in what spirit its pacific endeavours have been met in this country. The fact is, British homeopathists have been making a great mistake these forty years. We have appealed exclusively to the profession to listen to our arguments and look at our results. Like "M.D.," they will look at nothing about homeopathy except through such distorting media as the

Lancet. We now appeal to the people. The medical profession exists for the good of the people, and not, as is often supposed, the people for the good of the profession. A Homocopathic League has been started for the purpose of educating the public. If, when we have placed the facts fairly and fully before the people, the public voice is given in favour of the happy-go-lucky treatment of "ordinary practitioners," described by "M.D.," we, at any rate, shall have done our duty. As each individual has the right to employ his own doctor, so the nation has a right to say which system of treatment it prefers. Hitherto it has had no fair means of judging. It is our aim to remedy this defect. Homoeopathy does not profess to be infallible or perfect—it does not exclude other means; but it does claim that it is founded on a scientific basis of fact, and that it possesses an invaluable rule for the guidance of its practitioners. On the other hand, the so-called "orthodox" or "regular" system of medicine is, as Dr. Dudgeon has observed, and as "M.D." has so pointedly exemplified, "'orthodox' without a 'doxy,' and 'regular' without a 'rule.'"

JOHN H. CLARKE, M.D.,
Physician to the London Homocopathic Hospital,
Editor of the Homocopathic World.

15, St. George's Terrace, Gloucester Road, S.W.

"Douglas" has accepted the offer, and is at present under our care. As he lives at a distance, the treatment has to be carried on by letter. The result will be announced in due time.

# SOCIETY'S MEETING.

#### BRITISH HOMEOPATHIC SOCIETY.

NINTH ordinary meeting of the Society, June 3rd, 1886, Dr. Roth, Vice-president, in the chair. Dr. Goldsbrough read a paper on a case of Acute Entero-peritonitis with the formation

of Pus.

The patient, a young lady, was taken suddenly ill with pains in the body, having been up to the time in perfect health. She had drunk on the day she was taken ill a draught of cold milk when in a heated state on a hot summer's day. Afterwards she was frightened by a horse. She was taken suddenly with pain in the body, and when seen had a dirty tongue, fever and sickness. These symptoms continued with varying intensity for many weeks, the temperature rising at times to 102°. At length pusformed and discharged through the vagina. Another opening was made near the umbilicus. Dr. Goldsbrough considered that this case was an idiopathic one. He thought the pus found its way along the easiest passages. In reference to treatment, he thought that Merc.-Cor. was much indicated. Bryonia was more efficacious in the 6th dilution and upwards than lower. He

could not say that pus could be prevented from forming. He thought Arson.-Iod. did the patient much good. He regarded his case as a good example of the vis medicatrix natura aided

by homosopathic medicines.

Dr. CLARKE said he had had considerable experience with peritonitis, having become acquainted with it in his own person when he was a student. In his case it was apparently idiopathic, the only cause to which it could be attributed being cold. He was treated by opiates, and when these caused persistent sickness morphia suppositories were used instead, and these caused no sickness. He made a fairly rapid recovery. He had recently seen another case in which there had been apparently idiopathic peritonitis. This was in a patient, a woman aged forty-six, on whom he had made a post-mortem examination, she having died from rupture of an aneurism into the pericar-Incidentally he found that there had been extensive peritonitis, leaving adhesion of the liver to the parietes and the omentum to the intestines and pelvio viscera. There was no organic mischief to which the peritonitis could be attributed. In a case of tubercular peritonitis in a youth, rupture of an abscess took place at the umbilicus, and along with the pus flatus and fæces escaped. He considered that there was a diverticulum from the small intestine to the umbilicus—a most common position for one—in this case. He wished to ask Dr. Goldsbrough if there was any fæcal odour with the discharge in his case. In regard to remedies, he had not met with such success as he had in some other diseases. Bryonia and Merc.-Cor. had acted brilliantly at times, but at other times they had Colocynth had relieved the colic.

Dr. Blake congratulated Dr. Goldsbrough on the successful issue of his case. He had seen cases end in dysentery when they discharged through the vagina. There was no classic order of symptoms, and they might take many forms. He had known cases where there was no pain—patients would be walking about with the pus within them. The temperature and the pulse were no safe guide. The best way was to let out the pus as soon as possible, and wash out the body. A low form of cellulitis, especially in drunkards, often was the starting-point. Arenicum,

Bell., and Hepar low, were the best medicines.

Dr. French (of San Francisco) said Aconite had never given him much benefit. Carbo Veg. had helped him very much from 6x to 30x. He thought Arsenicum was indicated all through, and he should have given it alone. A local application of Aconite with sweet oil and a little chloroform, and over it a hot, light poultice of linseed, was of great use.

Dr. Harmar Smith had a strong feeling that the frequency of change of medicines and alternation of the medicines was a mistake. It prevented his being able to come to any conclusion

about the particular part played by any of the drugs given in the case.

Dr. Noble congratulated Dr. Goldsbrough on having brought his case to a successful conclusion in spite of alternation. He thought the patient would have died if one medicine alone had been given. Hepar and Silicea evidently did good work; and from the Arsen.-Iod. acting so well he would expect a marked family history of scrofula.

Dr. Washington Epps (who was acquainted with the family of the patient) said that the family were excitable, and one died of convulsions. There was no marked scrofulous history.

Dr. Hughes quite expected to have heard that the case ended in death; and if under other than homeopathic treatment he believed the girl would have died. Dr. Hughes differed from Dr. Blake, and thought the thermometer was of the greatest use. He was strongly of opinion that prescribing should be guided by the temperature. The medicine in his mind during all the later part of the case was Silicea; he preferred it much to Hopar Sulph. His experience agreed with what was said in the text-books—that idiopathic peritonitis was rare. He had seen two cases of peritonitis where pus discharged through the umbilicus, and both of these got well.

Mr. Harris said he had not had much experience with peritonitis. One case was seen one day and died the next. Bryonia 6 had helped several cases. He was to a small extent responsible for the case related by Dr. Goldsbrough, his partner. He protested against Dr. Blake's idea that the thermometer was no guide. If taken night and morning it gives a key to the nature of the case. Although the case has got well, he believes that it was a tubercular one; and the conclusion was arrived at from the temperature. He defended alternation as being practically very useful, though perhaps not so scientific as the use of single remedies. Iodine 6 and Arsen. 6 he had used persistently in some cases, but he had found more good from the Iodide of Arsenic than from either. He thought with Dr. Hughes that this case ought to have died according to precedents.

Dr. Murray had had a case of typhoid in which the symptoms took on a form very like that of Dr. Goldsbrough's case. The child was able to go out after the typhoid fever. During convalescence there was a little indiscretion of diet. Tympanitis and severe pain manifested themselves. Carbo Veg. was of great use for some time. Towards the close of the case Dr. Blackley saw it with him in consultation. There was much emaciation. There was no appearance of pointing, but at one point there was a feeling of softening, though no pain or tenderness particularly at that part. The child died and there was no post-mortem.

1)r. French did not make any proposition to give Arsen. for

two or three weeks. Dr. French was formerly an allopath, and a supreme hater of homoeopathy; but since his conversion he had come to the belief that the best results were obtained from study of cases and selection of single remedies.

Dr. JAGIELSKI asked if there were any shiverings.

Dr. Goldsbrough said there were none from beginning to end.

Dr. Dudgeon said he thought idiopathic peritonitis was not so rare as some supposed; for in post-mortem examinations it was common to find local adhesions indicating local peritonitis. medicine that had not been mentioned was Cantharis. This he had used with good effect not only in peritonitis but in pleurisy. A case of purulent accumulation in the body once happened to him where the purulent discharge occurred through the vagina. He did not expect the patient could recover, but she did, and is now the mother of a family. Another case was one of pleurisy. It was of a chronic character, and there was extreme exhaustion. He did not know what the character of the exudation was. He had almost given up the case when the patient discharged an enormous quantity of pus through the cesophagus by vomiting. Respecting alternation, if diseases were simple, simple remedies would suffice; but they are not. In view of this, Hahnemann once suggested mixing medicines. With regard to giving Aconite when increase of temperature occurs in disease, it is sometimes very disappointing. He mentions a case of rheumatic fever where the temperature went up to 106°, and remained there three or four days. It was only on giving up Aconite and giving Agarious that the temperature came down. We cannot give it as an anti-pyretic, as the allopaths do, in supposed imitation of homœopaths.

Dr. HARMAR SMITH said that the action of remedies was com-

posite, and might fit composite diseases.

Dr. Dudgeon said there was only one remark he had to make in reference to that; in cases of complex diseases it was seldom that the composite action of drugs marched on all fours with the complexities of the disease.

Dr. Beater (of Dublin) said that Hahnemann sought to give

the totality of symptoms in one medicine to cover any case.

Dr. Blackley had seen several cases of peritonitis. One was that of a lady of fifty-seven, a rheumatic patient. About last January she began to complain of piles, for which Dr. Blackley treated her, and also of very obstinate constipation. This she had endeavoured to meet with liquorice powder, senna, etc. Acid. Nitric. and Sulphur gave some relief, but defecation remained painful. Mr. McKellar, of St. Thomas's, removed the piles. The patient did well; no rise of temperature occurred till a fortnight after, then there was slight rise. The bowels became obstinate again. Mr. McKellar suggested Cascara,

which acted pleasantly. This went on for a few days, when an irritable state of the bowels set in, passing small hard stools frequently. Then there was tenderness over bladder, and she had to be catheterised. In a month she went into the country. After she was there a few days he heard she was in extremis. The medical man said she had stricture of rectum, either malignant or simple. In a fortnight she died. There was a post-mortem examination, which showed that there was no stricture of the rectum, but stricture of the small intestine. There was universal peritonitis, of a slow kind, which had caused matting of the bowels, and a band of organised lymph constricted a part of it. He had no doubt that the chronic peritonitis had been present seven years, since she first began to suffer from abdominal symptoms.

Dr. Goldsbrough (in reply) said, in reference to the remarks made on alternation, that there is an ideal homeopathy that we should aim at-to cover the totality of symptoms by one medicine; but, in practice, our knowledge and faculties being imperfect, alternation was necessary. Regarding the question of relation of Aconite to the rise of temperature from the formation of pus, he said that in hectic he had found. Aconite, given at night, of the greatest use. He believed there was a homogopathic relation between Acouste and this hectic. He believed that the formation of pus was very common. Regarding the tubercular origin of this case, and the family history, three uncles are healthy, strong men. The family history so far is very good, except that her brothers and sisters are nervous, and subject to constipation. He believed the temperature a most valuable guide to both diagnosis and treatment—much safer than the pulse. There was no fæcal odour with the pus.

# INSTITUTIONS.

# CONVERSAZIONE AND BAZAAR AT THE LONDON HOMŒOPATHIC HOSPITAL.

As announced in our last issue, the Hospital in Great Ormond Street was given up on Friday, the 4th, and Saturday, the 5th of June, to a mixture of business and festivity of an interesting and, as it has appeared, of a remunerative kind. Far and wide the announcement had gone abroad that on those days a bazaar would be held in aid of the fund for opening and maintaining the new ward which was built two years ago, but has remained

unoccupied by patients because the Board of Management did not see their way to incurring the necessary additional expense from year to year, and urgent was the invitation to all who value our metropolitan Institution to attend on those occasions, and by gifts and purchases show that homoeopathy is not a forgotten or a bygone thing. The central hall and ground floor of the sombre old building was so decorated with palms and other evergreens as to give it an attractiveness in great contrast with its usual dulness; while the Hahnemann Ward, fitted up. with stalls and replete with articles of rich colour and dainty handiwork, offered to the sympathetic buyer an alluring market of wares, some necessary, some useful, but most displaying admirable taste in selection or manufacture. In this ward was the bazaar proper, and here, shortly after the formal opening by Lord Ebury and the Lady de Ros (who accompanied his lordship in consequence of the unavoidable absence of Lady Ebury), thronged a numerous and bright company, well disposed to buy, and well pleased to pay the not exorbitant prices that were. being charged. In a small room adjoining was an institution of a rather novel but most pleasing character, a stall for the sale of "clothing for the poor," which appeared to supply a general want, if we may judge from the ready sale of the articles given for that purpose. But farther on, in the new ward dedicated to the memory of our late lamented colleague Dr. Bayes, and forming the raison d'être of the whole business, was to be seen an exhibition of another kind. Among the proposed plans for raising the necessary maintenance fund is what is called a "Fine Art Distribution," the tickets for which are one guinea each, or six for five guineas, each ticket entitling to a chance in a prize drawing to take place in December, and entitling also to a prize of some value or other, the lowest being five shillings, the highest not less than fifty guineas, and, it is hoped, a great deal more. In the Bayes Ward, therefore, were exhibited the first prizes—that is, the earliest received, and not the highest in value which are expected. Viewed as an exhibition of the prizes offered, it was not a great show, although the total value could hardly have been less than £300, but looked at as the initial display of a movement yet in its infancy, which is all it professed to be, it gave ample promise of a large and valuable array of prizes, to be drawn for in due time. Completing the circle of the ground floor, the whole of which was given up to the special occasion, the Board Room was found in the possession of some ladies, whose generosity to the Hospital on all occasions, and for all sorts of purposes, is a part of its history, and who were displaying their active interest in the new development of the Hospital by supplying refreshments at most reasonable prices and in a manner which could

hardly fail to afford much gratification to those who attended the bazaar. In this good and necessary work the Miss Bartons had the kindly assistance of the Miss Camerons. Returning to the bazaar, the names above the stalls attracted attention. There was Mrs. Vaughan Morgan and Mrs. Bayes, with Mrs. S. Vaughan Morgan and the Miss Trapmanns, presiding over an extensive display of materiel for sale; there was Mrs. Yeldham and Miss Yeldham not less busily occupied; Mrs. Blackley earnestly engaged in the business of selling her fancy wares; Mrs. Dudgeon and the Miss Dudgeons combining a fancy stall with the active sale of flowers, and displaying much energy in their self-imposed duties; Mrs. Suss-Hahnemann at another stall, and Mrs. Matheson at another, busily engaged in disposing of the contents of most attractive stalls. The flower stall, a structure laden with floral decorations of all kinds, was under the kindly auspices of Lady Adelaide Cadogan, with whom were associated the Countess Sydney, Lady Alfred Paget, Lady Clarence Paget, Lady Emily Dyke, and Lady Windsor; while the clothing-for-the-poor stall was excellently managed by Miss Grant. The whole occasion appeared to be one of very cordial interest and enjoyment, and all comers appeared to be well pleased both with their purchases and the general arrangements of the bazaar. Of course, when the visitors inspected the wards, as many of them did, they were loud in their praises of the admirable state of comfort in which they found the patients -a state, it may be observed, by no means peculiar to that occasion, but in every way usual. The Children's Ward was naturally the goal of many a well-pleased visitor, and looked, as it always does, the best and most cheerful of retreats for afflicted little folks. Among the amusements were some talented performances on the violin by the Master Walenn, while on Saturday Miss Lakey, a vocalist of great promise, sang in an effective manner. There was an amusing fine art exhibition, and later in the day several performances of "Professor Ewydirpp's Living Waxworks," which were much sought after, and proved a source of infinite diversion. Professor Ewydirpp and his troupe, who give their services entirely free of all cost, are to be congratulated on the excellent manner in which they go through their "waxwork exhibition," and for the entertaining nature of their songs, which are written and composed especially for them by one of their number. All the friends of the Hospital will be glad to hear that the takings on all accounts during the two days amount to £500, and although the unavoidable expenses have to be deducted, it will be seen that a very handsome return will be realised, which, added to the donations promised for the new ward, and the capital value of some other items, will make a total value on account of that ward of about **£6,0**00.

#### LIST OF DONATIONS ALREADY PROMISED OR RECEIVED.

President.	£ s	3.	<b>d.</b> (		£	8.	đ.
The Lord Ebury	100	ō	ö	Mrs. A. R. Harding	<b>~</b>	5	Ö
BOARD OF MANAGE	Samuel Wix, Esq. (per	•	•	٠			
Chairman.				Dr. Yeldham)	5	5	0
MajorVaughan Morgan	1000	0	0	Mrs. Van Raalte	ō	5	ŏ
Vice-Chairman.		٠	1	A. C. Clifton, Esq., M.D.	5	5	ŏ
Henry Tate, Esq	100	0	0	Dr. Galley Blackley	5	5	ŏ
Colonel Clifton Brown	100	Ŏ	ŏ	Dr. Galley Blackley Duncan Matheson, Esq.,	•	•	٠
Alan E. Chambre, Esq	31 1		ō	M.D	5	5	0
William Debenham, Esq.		Ŏ	ŏ	Henry Shackleton, Esq.,	•	•	٠
Wm. Burton Muller, Esq.	25	Ŏ	Ŏ	М.р	5	5	0
J. P. Stilwell, Esq., and		-	-	D. Dyce Brown, Esq.,	•	•	•
Friends	21 1	6	0	D. Dyce Brown, Esq., M.D	5	5	0
James Slater, Esq	21	0	0	A. Rosher, Esq	5	5	ŏ
Frederick Rosher, Esq		0	0	Miss Barclay	5	5	Ŏ
John Grey, Esq		Ō	0	A. Gordon, Esq.	5	5	ŏ
Major-Gen. Beynon	15 1		0	A. Gordon, Esq The Hon. Mrs. Wellesley	5	5	ŏ
H. W. Prescott, Esq			0	Samuel Clarke, Esq	5	5 5 5	Ŏ.
Gen. Sir James Alexander,				For the "Baves Ward."	•	-	•
	10 1	0	0	from H. C. R. and			
K.C.B H. W. Tinné, Esq.			-	A. R. R., in Grateful			
(Annual Subscription)	10 1	0	0	and Loving Memory	5	0	0
F. B		0	0	Mrs. Gordon Clark	5	ŏ	ĕ
			-	Mrs. Lucy Cohen	5	ō	ŏ
A Lady Friend	500	0	0	Dr. Hilbers	5	ŏ	ŏ
James Spicer, Esq	50	ŏ	ō	J. Say Clarke, Esq., M.D.	5	ŏ	ŏ
James Spicer, Esq Anonymous	50	Õ	ō	H. E. Gurney, Esq	3	3	ŏ
L. B	25	Ō	ō	Mrs. Bourlier	3	3	ŏ
L. B M. B	25	Õ	ō	Lady Bentinck	3	3	ŏ
J. Oxley Laurie, Esq. (per			-	Lady Bentinck Miss Gaitakell	2	2	ŏ
Alan E. Chambre, Esq.)	25	0	0	W. H. Harvey, Esq. (rer	-	-	•
Rev. C. R. Howell	21	0	0	Dr. Yeldham)	2	2	0
Mrs. Barrable	21	Õ	0	Mrs. Vacher (per Dr.	_	_	•
Major Bell	21	Ō	0	Dyce Brown)	2	2	.0
Mrs. Bayes (Proceeds of			- 1	G. A. Cross, Esq	2	2	Õ
a Drawing-room Sale)		0	0	R. E. Dudgeon, Esq.,	_	_	-
Dr. Yeldham	10 1	0	0	M.D	2	2	0
The Worshipful Company				J. H. Clarke, Esq., M.D.	2	2	Ò
of Carpenters		0	0	Miss Carey	2	ō	Ō
The Worshipful Company				The Lady de Ros	2	0	ō
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The Lady Llanover		0	0	Miss Goldsmith (per Dr.	-	-	-
A. M. Tapp, Esq		0	0	Hilbers)	1	0	0
Mrs. S. A. Peto		5	0	Miss Jones of Penlan	ī	ŏ	ŏ
Mrs. S. Vaughan Morgan	5	5	0		-	٠	•

In addition to £1,100 generously given for the New Ward.
 Also a Valuable Painting for the Fine Art Distribution.

#### NEW ANNUAL SUBSCRIPTIONS FOR THE WARD.

1	Miss J. Durning Si	mith (	(Annual	Subscr	iption	to	endow	Three	£	8.	đ.
1	Beds)	•••	•••				•••		105	0	0
	Henry Shackleton,	Esq.,	M.D.		•••	•••		•••	3	3	0
٠	Dr. Byres Moir		•••						2	2	0

• This handsome Aunual Subscription, combined with other Annual Subscriptions and large Donations promised, together with about £112 per annum receivable from the Bayes School Fund and the Bayes Memorial Fund, will provide fully one-half of the additional income required.

May, 1886.

G. A. Cross, Secretary.

Cheques and Money Orders should be crossed "Prescott and Co." Money Orders should be payable at the "Chief Office," in the name of the Secretary.

The Telegraphic Address of the Hospital is "Homceohosp, London."

#### FINE ART DISTRIBUTION.

TICKETS ONE GUINEA EACH, OR SIX FOR FIVE POUNDS.

This Art Union is being organised to take place at Christmas, 1886.

A FINE ART DISTRIBUTION in connection with the fund for opening the new ward will be held at the Hospital when the next annual Christmas treat to the patients takes place. Due notice will be given to every subscriber, and the prizes will be drawn by one of the children patients of the Hospital.

The price of the tickets will be 21s. each, or a set of six for

£5, and every ticket-holder will be entitled to a prize.

These prizes will vary in value from 5s. to £52 10s., and will comprise, in addition to an immense variety of lesser works of art, the following, which will be first prizes (unless still more valuable works of art be contributed):—

A pair of oil paintings, by Samuel Bird, the joint gift of the

'artist and Dr. J. H. Clarke, value 40 guineas.

A water-colour painting, by Arthur Croft.

A water-colour drawing, by Absolon.

An oil painting, by E. Rosher.

A water-colour painting, by Dr. W. H. Wheeler, which was selected by the Institute of Water-colour Painters.

"Poppies," by Mrs. Wheeler.

Other prizes will consist of oil colours by Mrs. E. Shapland (an exhibitor at the R.A.) and Mrs. Stanley Wilde; a valuable carved oak screen, the gift of Lady Llanover; pictures presented by Major-General Beynon; a bust of the Prince of Wales, by Adams-Acton; a cabinet of wood, ebonised, with photograph of six groups of flowers and butterfly, stools of the same design, a handsome screen, hand-painted on silk, with bamboo frame, and several hand-painted vases and plates, contributed by Mrs. Bayes; hand-painted vases and plates, contributed by Mrs. Bayes; hand-painted china; imitation ivory plaques; pottery, embroidery, two hand-painted satin fans, painted china, two sets of hand-painted finger plates, and a handsome hand-painted fern stand, given by Mrs. Vaughan Morgan; and many other pictures and works of art.

#### MEMORIAL AND ENDOWED BEDS.

THE yearly subscription for an annual endowment is £35. The sum requisite for a permanent endowment is £1,000. No better memorial of those who have gone before, or expression of thankfulness for special mercies, can be devised than the foundation of a bed, which, while fully commemorative, is a constant benefaction to the suffering.

One bed receives about fifteen ordinary patients in the course

Already a munificent benefactor of the Hospital purposes to maintain three beds in the new ward, an act of grace and generosity for which the Board cannot adequately express their

acknowledgments.

A confident hope is also entertained that an "In Memoriam" bed will also be founded, while the friends of the late muchlamented Dr. Neville Wood are raising a fund to maintain a bed in his memory.

#### HAHNEMANN HOSPITAL, LIVERPOOL.

THE new Hospital in Liverpool, now being erected by the munificence of Mr. Henry Tate, is to be called the Hahnemann Hospital. No better name could be chosen. We all look for the day when homeopathy will be recognised by all medical men as the only scientific method of drug administration, and then all hospitals will be homosopathic; but the name of Hahnemann is destined to grow in honour, and the time will never come when it will be inappropriate to call an institution devoted to the art of healing by the name of the great Reformer of Medicine and benefactor of mankind.

The Builder of May 22nd presents its subscribers with an engraving of the new building, which will be one of the handsomest and best equipped of its kind in the kingdom, together with a plan and the description which we are happy to here append.

#### "THE NEW HOMEOPATHIC HOSPITAL, LIVERPOOL,

This building, of which we give an illustration this week, occupies a prominent site at the corner of Hope Street and Hope Place, Liverpool. The illustration shows the exterior from the north-east angle.

The building is designed to accommodate fifty beds at present, and is capable of being enlarged, on the south and west sides, so as to provide twenty or thirty more.

The basement is arranged as a dispensary, to take the place of the

present one in Hardman Street.

The building is upon the red sandstone rock, and stands high in what is considered to be the healthiest part of the city.

The wards are arranged to have a southern aspect, and in the case of the three larger ones, cross lights, and large windows at the west ends. The large wards (male and female) on the first and second floors are 69 ft. by 24 ft., and have each a convalescent-room, with large bay window at the east end. A smaller ward is provided on the first floor, and two infectious wards, completely isolated from the rest of the building, on the second floor. Two separation wards are arranged on the first and second floor; and five private wards, with a convalescent-room on the third floor, all being lofty and well lighted. Service-rooms, with hot plates, sinks, dinner-lifts, etc., are placed next the wards, and nurses' room, with inspection-openings commanding all the beds. The latrines and bathrooms at the ends of the wards are completely cut off by an air-space and double doors from the wards adjoining; they have a separate system of warming and ventilation, and will be lined throughout with glazed tiles, and have polished cement floors.

Nurses' bedrooms, and dining-rooms, an operating-room with north and top light, servants' bedrooms, etc., occupy the remainder of the

upper floors.

The main staircase is of granolithic stone; and the whole of the

corridors are of fireproof materials.

On the ground-floor are the kitchens, sculleries, larders, stores, servants' hall, pantry, and service-room, in the south wing. The board-room, stores, office, porter's room, boys' room, and entrance-hall, are to the front. The House-Surgeon's sitting and bed room and spare room; the matron's sitting and bed room, bathroom, etc., and large store, with hoisting doors to yard, in north wing.

A hydraulic lift for patients will be provided from the ground to the third floor, in the well-hole of the stair; and a coal-lift from the

basement to the top of the building.

With the exception of a large store-room, the wine and beer cellars, and the mortuary, the whole of the basement floor is devoted to the dispensary requirements. A large waiting-hall, with latrines to the west end, is provided, with porter's room overlooking it, and, communicating with a spacious corridor, off which are seven well-lighted consulting-rooms, a waiting-room, with dispensing-room and exit door, completes the arrangement of this floor. Dados of glazed brick are provided in the hall and corridors.

The sub-basement is devoted to the heating-chamber, coal-places, air shafts, and chambers of the heating and ventilating apparatus.

The exterior of the main front is faced with red Ruabon brick, the strings, cornices, window-dressings, etc., of stone from Stourton quarries. The ridges, hips, and finials are of terra-cotta, and the roofs are covered with Welsh slates. The drainage of the building has received special attention, and the soil drain-pipes will be flushed out by means of a large self-flushing tank (Bowes Scott and Reid's patent) placed at a point where the soil-pipes from the closets join the drain. The ventilation and warming are arranged on the 'self-acting suction power' principle, as successfully applied by Drs. Drysdale and Hayward, of Liverpool, to several dwelling-houses in the neighbourhood, and may be briefly described as follows:—The foul air is extracted from all wards and rooms by flues situated near the ceilings, carried up through the walls to a horizontal foul-air chamber in the roof. This chamber is intended to cause all the foul-air flues

joining it to be drawn on equally by the central downcast shaft, with which it is connected, and which conveys the foul air to the bottom of the great upcast-shaft, which actuated the whole system, and is then carried up the same, rising some distance above the ridge of the roef, and finished with an iron hood, having side openings for the escape of foul air. The centre of this shaft is occupied by an iron the from the kitchen fireplace and heating apparatus boiler, and also connected with a large Cockle stove for use when the boiler is not required.

By this means a powerful current will be induced in the upcast and consequently in the downcast shaft and its connecting system of foul-air chambers and flues. Regulating valves will be fixed at both the upper and lower ends of the foul-air flues to admit of them being accurately adjusted. Central fireplaces are provided in the large wards, of iron and earthenware, with separate air supplies, water-

trays, marble tops, etc.

The fresh air is introduced into the various rooms and wards, etc., by means of flues in the walls, connected at their lower ends with a chamber heated by rows of hot-water pipes and running round the whole of the building under basement floor. A perforated wall allows the fresh air from an adjoining air-chamber to pass over the hot-water pipes so as to enter the various rooms at a temperature of 60 deg. in the coldest weather.

Fresh air is supplied to the air-chamber by means of seven 'Æolus Water-spray Inlet Ventilators,' which suck the air from some height

sbove the ground.

By means of these appliances and the regulating valves at the upper ends of the fresh-air flues, the supply of heated or cold fresh air can be regulated with the greatest nicety, or shut off from wards not in use.

The hospital, the first contract for which amounts to over 13,000l., is being erected at the sole cost of Mr. Henry Tate, of Park Hill, Streatham, and Liverpool, on the freehold site recently purchased by him from the Liverpool Corporation.

The contractors are Messrs. Holme and Green, and the architects Messrs. J. and G. Holme, of Liverpool. Mr. W. Bell is clerk of

works."

# THE SOUTH WALES HOMEOPATHIC INSTITUTION, EDWARDS TERRACE, CARDIFF.

WE have received from Dr. W. Morgan the sixth annual report of this Institution, from which we quote as follows:—

"From the founding of this institution in December, 1879, to the end of April, 1886, there have been registered 6,286 patients, who required 6,757 attendances and medicines, besides 2,234 visits at their own homes. In May there were 85 entries, which required 152 attendances and medicines, besides 132 visits at their own homes. Of these 29 were cured, 3 no change, 1 ceased attendance, 52 more or less improved and continue under treatment.

The Rules upon which this Institution is based are as follow:—

Donors of five guineas become life governors, which entitle such

donors to have one patient constantly on the books.

Annual subscribers of two guineas are entitled to fourteen dispensary, and four home tickets; each ticket being available for one month's treatment from date of entry.

Subscribers of one gninea, to six dispensary, and one home ticket. Subscribers of half-a-guinea, to three ordinary dispensary tickets. All applicants not furnished with tickets, to pay one shilling each

time, or five shillings a month.

All home tickets are available for one month's attendance, at the patient's own home, provided such patient resides within a mile or so of the doctor's residence."

### SEQUEL TO THE INQUEST.

THE following correspondence has appeared in the Sydenham and Penge Gazette consequent on the inquest, a report of which we gave in our last issue:—

#### "ALLOPATHY V. HOMŒOPATHY."

Sir,-My attention has been called to a report in your last issue of an inquest on a lady at Sydenham, bearing also as a subsidiary heading "Allopathy v. Homceopathy," this latter being suggested, I presume, by the apparent animus against homosopathy displayed by the medical witness examined at the inquest. As one, therefore, who has long known the value of homoeopathy as a principle of medical treatment, I feel the report thus published calls for some notice. I have no intention of saying anything about the case itself, as I have no personal knowledge of it, but I shall be glad if you will allow me space to refer to at least one statement you report as having been made by Dr. Roberts, the medical witness above mentioned; a statement which I think will go far to show how little knowledge he had of the matter of which he was speaking. Your report says: "In answer to further questions, witness said arsenic was a valuable medicine in some cases, but he was not aware of its being used for pulmonary diseases." Now, sir, medical men of both schools of practice have used arsenic in pulmonary diseases. Among homoeopathists arsenic has been long known, and especially the iodide of arsenic, as a medicine of great value in such diseases; and many cases are recorded in homoeopathic works, in which great benefit has been derived from its use. And even within the last month I myself have seen surprising improvement resulting from the use of iodide of arsenic in a case of chronic pulmonary disease under my own care. In proof that the value of arsenic is now recognised by medical men connected with allopathy also, we have evidence in the case before us, as "Dr. Scott, an allopathist," of Bournemouth, prescribed the same medicine as "Dr. Fleury, a homocopathist," of London; but as still more weighty evidence I will quote from a professional work issued by Dr. Sidney Ringer, who, though a debtor to homeopathy for much of the valuable information his work contains, is an eminent teacher of medicine in connection with allopathy at University College, and Physician to



University College Hospital, London. He writes as follows:— "Arsenic has lately been extolled in phthisis and tuberculosis. It is said to improve the appetite, increase assimilation, lessen expectoration and cough, and to promote cicatrisation (i.e., healing) of cavities. It is stated that it will reduce the temperature in tuberculosis, and after carefully investigating this subject I am inclined to believe so. Moreover, I have seen children in a hopeless state, with severe tuberculosis involving lungs, intestines, and peritoneum, steadily and slowly improve, and ultimately recover under arsenic treatment, and I have observed a like result in adults with phthisis, in the subscute and chronic forms." I might give other quotations, but what I have written is sufficient I think to show that arsenic is an important remedy in pulmonary disease, and used by medical men of both schools. If Dr. Roberts had known this, he might perhaps have saved the bereaved family the painful ordeal of an inquest, and have avoided casting a slur upon homocopathy, as well as disparaging the treatment of the two medical men of opposite schools, who had

I am, Sir, yours, etc.,
ALBERT WILLIAMS, M.D.

#### 60, Kirkdale, Sydenham.

Sir,—I have only to-day seen your issue of the 8th inst., in which

the extraordinary inquest on Miss M'Kenzie is reported.

previously had this sad case under their charge.

Dr. Roberts's ignorance of homeopathy and homeopathic remedies is little to be wondered at, seeing that similar ignorance prevails so largely and unaccountably among the doctors of the old school. seems not to have the faintest idea that the fact which he noticedthe resemblance of a case of advanced consumption to one of arsenical poisoning—is the very reason why, on the principle of similia similibus curantur, arsenic is employed by homoeopathists as a remedy, and is found so very valuable. But I was hardly prepared to find that a qualified practitioner should state in public that he had never heard of the use of arsenic in pulmonary disease. In all recent books on medicine, arsenic is named as a most valuable remedy-one of the most valuable—in chronic bronchitis and consumption. In the last few years reference to this fact is of frequent occurrence in the allopathic medical journals. Had Dr. Roberts been aware of what every medical practitioner ought to know, the idea of arsenical poisoning would not have occurred to him, and the inquest would never have been held. Yours, etc.,

A HOMCEOPATHIC M.D.

P.S.—I may add that this use of arsenic is one of the many examples nowadays of the appropriation of homoeopathic remedies by the old school without acknowledgment.

Sir,—In your report of the inquest held on the body of the late Miss M'Kenzie, as also in letters appearing in your issue of last

Saturday, I am referred to as a "homoeopathist."

I cannot of course prevent people calling me what they please, only I should like it understood that I do not designate myself "Homeopathist," "Allopathist," or, in effect, "ist" of any kind, being content with the title of "Physician," claiming to interpret that in the broadest sense and to use the resources of any school of medicine

which, in my judgment, are likely to benefit my patient. The enclosed copies of reviews (medical and lay) of my work, "Modern Household Medicine," will make this clear to you.

As regards Dr. Roberts's conduct, whether it had its origin in illwill towards other practitioners, or in crass ignorance of modern therapeutics, it will, I doubt not, receive its appropriate reward from public opinion. Your obedient servant,

C. R. FLEURY, M.D.

Russell Mansions, W.C., May 17, 1886.

# PREPARATIONS AND INVENTIONS.

#### BARILLA SOAP.

Our attention was directed to this soap by a correspondent who resides in a hot climate as being the best thing he knew for prickly heat, and as being at the same time an excellent soap for all ordinary purposes. Accordingly we have made an extensive trial of it, and have submitted it to the judgment of a number of our friends who are fastidious in the matter of their soaps. From one and all we have the same verdict—that it is one of the best soaps they have ever used, and a request for information as to whence it may be obtained. It is manufactured by M'Clinton and Thomson, of Belfast; and the agent in England is Mr. A. J. Hailes, 22, Beaumont Road, Hornsey Rise, London, N. The price is so low (6½d. per pound, and in quantities of ½ cwt. and upwards, 6 per lb.) that ordinary dealers in soaps do not care to sell it, there being too little margin for profit. It is sold in 3½lb. bars and ½lb. cakes.

It is a pure neutral white soap. It is unscented, and it does not lather so freely as some soaps on account of its having no excess of alkali. The following, extracted from *Papers on Health*, by J. Kirk, of Edinburgh, gives a good account of this pre-

paration :-

"When in search of really good soap we soon find that certain soaps are even harmful, especially if often used, while one or two others are evidently the right sort of thing. The essence of the difference seems to be in that between soaps made with 'soda ash,' as some soap makers call it, and soap made of 'potash.' But we have lighted upon a white, hard soap, made by M'Clinton and Thomson, which is to our thinking the very sort of thing we could wish for almost all purposes. We believe the making of this is a secret in possession of this firm alone, but their price is not at all high. It is made of Barilla ash. The Barilla is a plant growing abundantly in Sicily, Teneriffe, and we think also in some parts of Spain. It is gathered somewhat as hay is, and burned over large holes in the earth. When so burned the

'ash' from which the soap is made runs from it into the holes, and is secured and purified afterwards. There is something in the composition of this Barilla ash which makes it astonishingly curative and most agreeable on the skin. Lather made from it instead of drying and so far burning the hands and arms, for example, of those using it in clothes-washing, has the most soothing and delightful effect. We have tried the matter so far as to feel assured that this soap is by a long way the best at the price for cleansing and curative purposes.

"Very especially is it important to distinguish between the qualities of soaps used on the sensitive skins of infants and invalids. If you ever wash an infant in strongly caustic soap you may look for a state of discomfort in the child which will make it restless and miserable without your being able to tell how it is so. So with sensitive invalids when they have to be washed or soaped so as to keep off or heal the bedsores which are apt to appear on them. We have seen very remarkable

effects from the use of this soap.

"It is the very best and most lasting of the soaps we know for washing purposes, apart altogether from its use in curative processes, so that in recommending it we are not promoting the use of a merely medical thing, but of one for ordinary purposes of a genuine and excellent character. It is an excellent article for common use, well worth its cost. So soon as we see anything as suitable we shall gladly give it equal recommendation."

#### TRAVELLING AND NURSERY CONVENIENCE.

MESSES. James Allen and Sons have given the public an extremely useful invention in their "Travelling and Nursery Convenience." Externally it is indistinguishable from a small ordinary travelling box of japanned oak. We quote the follow-

ing concise description from Messrs. Allen's circular :-

"This article differs from anything of the kind hitherto placed before the public, in its extreme portability, absolute security, and cheapness. It is chiefly intended for use on long journeys by rail or steamer, by parents and nurses travelling with young children, and on this account its outward appearance is made to exactly resemble an ordinary article of luggage, so that its real nature cannot possibly be suspected. Its great convenience and value will be equally appreciated when visiting, or during residence in hotels or apartments, as likewise in the home nursery. It can be opened for use in an instant, and when closed is hormetically sealed, by means of an elastic waterproof pad of peculiar construction, and it may then be inverted or let

fall on the ground without the slightest risk of breakage or

escape of the contents.

"There are no loose parts which require removal or which could be mislaid, yet it can be instantaneously taken to pieces when necessary for the purpose of cleaning.

"The open space round the sides of the pan can be used for

toilet paper, etc.

"For these reasons it is infinitely superior in a sanitary point of view to all other inventions of a similar description.

"It can be had in a larger size for adults' use, if required."

It is manufactured solely by J. Allen and Sons, 21 and 23, Marylebone Lane, Oxford Street, London, W.

# REVIEWS.

#### RUBINI'S TREATMENT OF CHOLERA.1

Dr. Rubini, who, as he tells us at p. 75, completed his eighty-fifth year when this edition of his work was published, displays much of the energy that distinguished him during the prevalence of cholera in 1854-5. He confesses that at his age he is not able to run about from one patient to another day and night, but he is ready to do what he can. The main additions to this edition consist of a number of petitions addressed by the author, when the cholera appeared in Naples in 1884, to the King, the various Ministers of State, to the Prefect, and to the Archbishop of Naples, to induce them to cause the camphor treatment Dr. Rubini had found so efficacious in the former epidemics to be employed in the public institutions. Dr. Rubini's urgent requests were refused, on the ground that it was not the business of the official he addressed to interfere with the medical treatment of cholera; or they were referred to the medical authorities, who, being all allopathic, of course treated Dr. Rubini's petitions with contempt. And yet they were supported by facts and testimonials that would have been convincing to any one not steeped to the roots of his hair in the odium medicum. For Dr. Rubini's treatment was not a mere private affair, but was conducted in public establishments under the eyes of the authorities of the town, and its success was testified to by the superintendents of those establishments and other highlyplaced observers. And this success was certainly of the most startling character, and it is worth while recalling it. male wards of the Royal Albergo dei Poveri, an institution corresponding to our workhouse infirmaries, Dr. Rubini treated,

<sup>&</sup>lt;sup>1</sup> Statistica dei Malati di Cholera Morbus curati colla sola Canfora in Napoli por Dr. Rocco Rubini. 4to Ediz. Napoli, 1885.

in 1854, 225 cases of cholera with camphor alone, without losing a single case; and in the Hospital of the Barracks of the Third Swiss Regiment he treated, in 1855, 166 cases with the same remedy, and not one died! This result is the more striking as the first 17 cholera cases in this regiment were treated in the Military Hospital of the Trinity by old-school doctors, and of these 15 died.

Dr. Rubini's success at the Albergo dei Poveri created a great sensation in Naples. He had a small handbill printed, containing precise directions how to use camphor in the disease, and these were distributed by thousands among the people, who to a great extent adopted the treatment he recommended, and were able successfully to combat the dreaded disease, which

thereupon gradually disappeared.

Dr. Rubini's treatment is as follows. A strong solution of camphor is prepared by mixing equal weights of alcohol of 80 degrees with camphor broken into small pieces. This forms the saturated solution of camphor we are all familiar with under the name of "Rubini's camphor." As a prophylactic for those brought in contact with the disease, or living in cholera-haunted localities, he recommends five drops of this solution to be taken three times a day on a piece of sugar. He elsewhere (p. 58) says two drops every morning are sufficient. On the appearance of choleraic symptoms the patient should go to bed and be well covered with blankets. Five drops of camphor spirit should be given every quarter hour, until fever appears and perspiration Then the remedy is to be taken more rarely, and when sets in. the fever is gone the patient may take food, and after a few days of rest may return to his occupation. When the disease attacks more violently, the remedy should be given every five minutes, and in extreme cases in larger doses, fifteen to twenty drops. Frictions with camphor spirit should be made on the abdomen, chest and back, and clysters of a teaspoonful of camphor spirit in a little olive oil.

Dr. Rubini assures us that this treatment not only cures the cholera when employed at first, but is equally successful in relapses, and even in the typhoid fever that often follows attacks

of cholera.

Dr. Rubini says that he obtained equally good results from the camphor treatment in the epidemics of 1865 and 1867. Whilst the epidemic raged in Naples in 1884 he was absent in the Abruzzi in attendance on his brother, who was very seriously ill, so that he had no opportunity of personally treating the disease on that occasion. But he mentions that Drs. Cigliano, Mucci and Orioli treated 83 cases, 80 of whom were cured by camphor alone; the remaining three died "because they took along with the camphor other remedies which destroyed its action" (p. 58).

The curious thing about Dr. Rubini's book is, that he everywhere ascribes the discovery of the remedial effect of camphor in cholera to himself. He says that when in 1854 he found himself face to face with the cholera, he set himself to study the homeopathic materia medica, and convinced himself that camphor must be the sovereign remedy, because it reproduced exactly the symptoms of cholera, especially the algidism. A remark of Hahnemann in his Materia Medica, that "camphor is an antidote to almost all medicinal substances, and is able to destroy almost all poisons," confirmed him in the notion that it might be useful in cholera, which was supposed by the ignorant populace of Naples to be caused by poison administered for the purpose of revenge. Now, in the first place, Hahnemann does not say what Dr. Rubini seems to quote from his *Materia* He only says it "removes the too violent action of very many drugs." In the second place, the pathogenesy of camphor does not show any very striking resemblance to the symptoms of cholera, except, perhaps, to the algidism, which is tolerably well marked. In the third place, Hahnemann, when the cholera first appeared in Europe in 1831, announced that its remedy was camphor, and directed it to be used in almost precisely the same way as Dr. Rubini-viz., a drop of the camphorated spirit on a piece of sugar every five minutes, frictions with spirit of camphor over the body, an enema containing two full teaspoonfuls of the same remedy, and the evaporation of camphor on a hot iron plate in the room. Hahnemann's camphor spirit was not so strong as Rubini's, and he did not give so many drops of it, but the other employments of camphor he recommended probably make the quantity advised fully equal to Rubini's. Hahnemann nowhere says he was led to the employment of camphor in cholera on account of the resemblance of its patho. genetic symptoms to those of cholera. He seems to have learned its efficacy from its employment in Russia, and he distinctly says that it acts by destroying the minute living organisms (microbes, bacilli of modern writers) which he believed to be the cause of Hence he gave it in the large quantities mentioned It would have been contrary to all his maxims and practice to have given camphor in those large quantities had he believed it to be a medicine that acted according to the principle of similars. In fact in the same paper in which he recommends camphor in those massive doses, he advises cuprum and veratrum in the 30th dilution, these being homeopathic to the condition in which he recommends them, and not microbicides like camphor. However this may be, it is evident that it was Hahnemann, and not Rubini, who first recommended camphor in oft-repeated material doses for cholera, and he assures us that its success is precisely the same as that Rubini gives-viz., that it singly and alone cures every case of the disease if given on its first invasion.

Dr. Rubini says that the three fatal cases out of the eighty-three treated by camphor in 1884 would not have died had they taken camphor alone and uncombined with other remedies. Hahnemann says: "Not a tenth" (apropos of the treatment of cholera patients by camphor at Dünaberg), "nay, not one in a hundred of the patients would have died had the other ingredients, which are only injurious and obstructive, been left out, and the camphor been given alone."

It is difficult to understand how Dr. Rubini is ignorant of how completely Hahnemann anticipated him in the camphor treatment of cholera—Hahnemann's essay was published in 1831 (see Lesser Writings, p. 845). But it is evident that Rubini honestly believes himself to be the discoverer, for when a prize was offered in France for a remedy for cholera, he claimed it for himself—of course it was not awarded to him—and he says Italy ought to reward him for his discovery, just as England rewarded Jenner for his discovery of vaccination with £200,000 (the actual sum given to Jenner was £30,000), and as the German Government granted Koch for his cholera investigations £5,000.

We are quite willing to allow to Dr. Rubini the full merit of his successful treatment of cholera by camphor, but to Hahnemann alone must be accorded the praise for the discovery of that

treatment.

#### LESSONS ON CLINICAL MEDICINE.1

THERE are few clinical teachers at the present day who can compare with the author of the volume before us. The art of healing is one thing, and the art of teaching others how to heal The chief part of the latter is the art of is quite another. making your experience available for the use of others. are many men who are expert in treating sick persons, and who are yet unable to understand their own expertness, or to tell others why they adopt such and such measures in preference to different ones. The clinical teacher must be something more than this. Not only must he be expert in dealing with the sick, he must also have the gift of graphic description and of lucid statement, as well as sound judgment and solid reasoning powers. Dr. Jousset's reputation for all these qualities has long been established. He appears to have inherited the best traditions of the great French School.

Dr. Jousset thus defines the rôle of Clinical Medicine:—
"Clinical medicine (La clinique) is the application, at the bed-

Leçons de Clinique Médicale. Professées a l'Hôpital Homœopathique St. Jacques, 1877 à 1885. Par Le Dr. P. Jousset, Médecin de l'Hôpital Saint Jacques à Paris. Paris: Libraire J. B. Baillière et Fils, 19, Rue Hautefeuille, près du Boulevard Saint Germain, 1886.

side of the sick, of symptomatology or the manifestations of diseases, and of therepeutics; to transform it as Andral and Trousseau have done, into a course of pathology, is to misunderstand its rightful part in the assemblage of the medical sciences."

In this work Dr. Jousset keeps strictly to his office as he has defined it. The nosography of disease—disease as we know it at the bedside rather than in the post-mortem room—and the modification of disease by treatment,—these are what Dr. Jousset has depicted for us. It is impossible for us to indicate, however briefly, all the interesting matter contained in this volume; we must therefore content ourselves with referring to certain points.

Pleurisy is one of the subjects very fully dealt with by the author, and a most valuable series of cases may be found here recorded. The most interesting feature of the treatment is the value of Cantharis, which is demonstrated in the most conclusive way. Bryonia is of the greatest service when there is violent pain and considerable fever, but Dr. Jousset finds that to obtain the full benefit it must be given in two or three-drop doses of the mother tincture. When Bryonia has reduced the fever and the pain, *Cantharis* is the principal remedy relied on by Dr. Jousset against the effusion. He gives it at first in the third dilution, and goes down to the mother tincture if necessary. Aconite is indicated by violent fever, large pulse, sweats, great thirst, agitation and anxiety. It is mostly useful at the beginning of the illness, and for intercurrent returns of fever. Hepar Sulph. in the 6th dilution or 3rd trit. is to be used in chronic cases with manifest tendency to phthisis. Arsenicum in the 3rd trituration is called for by a tendency to fainting.

The indications for thoracentesis are (1) threatening suffocation; (2) imminent syncope; (3) an undefined and stationary condition.

The great value of China  $\phi$  in considerable doses (to half a

drachm) in erysipelas is strikingly exemplified.

But Dr. Jousset by no means confines himself to the use of the lower dilutions in his practice. One of the most interesting chapters in the book is entitled, "A clinical demonstration of the action of infinitesimal doses." One of his cases was that of a man of sixty-four, stout, ruddy, subject to gout, of very active life, who was taken with left supra-orbital neuralgia, which came on every morning. It began with a well-marked feeling of cold, and gradually increased, until at the end of three hours it had reached its height, at which it continued for an hour and then gradually declined, passing off in another three hours. The pain was accompanied by great heat. It commenced at 9 o'clock one morning, at 11 o'clock the next, and then again at 9. This is just such a case, as

Dr. Jousset points out, as might have been cured by quinine in substantial doses given persistently; and if it had disappeared after such treatment, no one would have questioned that quinine had effected the cure. *Nux Vomica* 6, 12, and 30 was given. The disease was modified on the first day, and completely cured in four.

On the first day of the treatment (the third day of the disease) Nux Vom. 6 was given, two drops in 100 grammes of water, a spoonful three times a day, in the intervals between the attacks—the first dose immediately before dinner, the second on going to bed, and the third on first waking. The second day there was a very slight attack indeed, occurring as before at 11 o'clock. The third day (fifth of the disease) there was a very sharp attack, again at 9 o'clock. Nux V. 12 was now given, four globules in 100 grammes of water, a spoonful three times a day as before. The next day there was no attack. The fifth day there was again a violent attack, but retarded two hours, and the patient himself much better. Four globules of the 30th were now given as before, and from that time there was no return. The other case was equally striking. It was one of intermittent fever, contracted in Panama, and was cured by Nux V. 30, after having been vainly treated when in Panama with large doses of quinine.

We can heartily recommend this admirable work to our

readers.

# THE MEDICAL ANNUAL, 1885-1886.1

This excellent compendium of the year's progress in the different branches of medical science and medical practice grows in usefulness and in popularity. The proprietor has secured writers of eminence in the special departments to write on the subjects on which they are most at home, and in Dr. Percy Wilde they have found the literary and organising talent needed to make the most of their work. The book opens with a review of the year's progress in science by Dr. J. E. Taylor, the deservedly popular scientific lecturer, and editor of Science Gossip.

Dr. Wynn Westcott writes on Therapeutics; Dr. Milner Fothergill on Glycosuria and Diabetes; Dr. Percy Wilde on Digestion. In a review of Dr. Lauder Brunton's lectures on this subject, Dr. Wilde mentions the value of *Hydrastis* in dilatation of the stomach. One of the most useful portions of the work is

<sup>1</sup> The Medical Annual and Practitioner's Index. Edited by Percy Wilde, M. D. London: Henry Kimpton.

that dealing with home and foreign health resorts by Mr. George Norman; whilst those who have to do with medical education either as teachers or students, will find ample information on this head in the *Medical Annual*. In the notices of institutions we find those devoted to homeopathy receive due recognition; and the books of homeopathic writers are noticed with the other literary productions of the year. We fail to see, however, any mention of Dr. Ameke's History of Homeopathy, translated by Alfred Drysdale and edited by Dr. Dudgeon.

Kimpton's Medical Annual bids fair to become one of the

necessities of the practitioner's life.

# GENERAL CORRESPONDENCE.

INTERNATIONAL HOMEOPATHIC CONVENTION, 1886-To the Editor of the Homeopathic World.

MY DEAR COLLRAGUE,—Having been suddenly called upon, in the middle of May, to take up the duty of organising this year's Convention, I communicated with as many Homeopethic Journals as time allowed me to reach, stating that the meeting would assuredly be held at the time appointed, and inviting adhesions and contributions.

I have now to announce that, after further correspondence with our Belgian colleagues, I have—in deference to their wishes—abandoned Brussels as the scene of our gathering. This city was chosen mainly for the sake of the homeopathists of the Continent of Europe; and in selecting Basle (Switzerland) as its substitute, I trust I have provided them with a rendezvous not less central and accessible, while those of America and Britain will not grudge a little extra travelling for their sakes.

By the aid of Dr. Brückner, who represents our practice at Basle, I have obtained an excellent hall of meeting, within easy reach of the hotels near the Central Station.

Igive notice, therefore, that our third quinquennial International Convention will be held at the above place on Tuesday the 3rd, Wednesday the 4th, and Thursday the 5th of August next; the first day to be devoted to general considerations bearing on homeopathy, the second to Materia Medica, the third to Clinical Medicine. There will also be a short business meeting at 8.30 p.m. on Monday, for election of officers and adoption of rules of proceeding. Sectional meetings can be arranged for at the discretion of the members, during the hours left vacant by the general sessions.

I cannot yet say what will be the prevailing language of the Convention; but every member will certainly be at liberty to

speak in his own tongue, provision being made for interpreting

his meaning to the rest.

I shall be glad if all who purpose being present will apprise me beforehand of their intention, that I may know for how many to provide. "Brighton, England," will find me up to July 19th; letters arriving later than this should be addressed—"Hotel Schweizerhof, Basle, Switzerland." I shall be at the hotel from 12 till 6 on Monday, August 2nd, when I shall be pleased to see all members who have arrived, and to give them prices of the papers for discussion and other information.

Let me remind the profession that funds will be required for this undertaking, and that Dr. Dudgeon, of 53, Montagu Square, London, is acting as treasurer. And now I have only to appeal to all who love homosopathy to join in making our gathering a

pleasure and a success.

Asking the favour of insertion in your next number,

I remain, yours very faithfully,

RICHARD HUGHES, Permanent Secretary.

Brighton, June 14th, 1886.

#### BAD SANITATION A CAUSE OF SMALL-POX.

To the Editor of the Homeopathic World.

Sir,—In the discussions on vaccination the reproach has often been directed against its opponents, that they have no remedy to suggest, and that on this account the specific of Jenner, although far from being an absolute security, is at least better than doing This reproach is the result of an unwillingness to listen to the arguments with which the anti-vaccinators support their position. The facts are, that for more than twenty years a large proportion of the most powerful writers against the followers of Jenner have distinctly propounded the doctrine that small-pox is essentially a filth disease, engendered and propagated by the foul habits and the indescribable pollutions of lazy and intemperate populations; and that to such causes the development and dissemination of the various zymotics is wholly due. The upholders of these views are aware that such diseases can be inoculated and vaccinated into other people, but they maintain that the artificial infliction is an unnecessary evil to the human race, which can have no other result than the multiplication of patients in hospitals or elsewhere. The charge against anti-vaccinators, therefore, that they have no proposal whereby small-pox may be mitigated or its epidemic form prevented, is wholly without foundation. Their leaders have during the whole course of the agitation against the existing coercive laws persistently and unceasingly recommended the safeguard of public and private sanitation, and they have done so with such decisive and telling effect that the prominent medical and official doctrine



previous to 1874 which proclaimed small-pox to be a disease over which sanitation has no power, is now almost wholly abandoned, and the medical profession themselves are now substituting the mitigated formula, that vaccination and sanitation should go "hand in hand." Witness the untiring efforts of Mr. H. D. Dudgeon, whose writings have done so much to substitute intellectual inquiry for blind submission, and to induce systematised sanitary amelioration in the town of Leicester. And those who wish to enter further into this all-important subject should study the writings of Mr. John Pickering of Leeds, Mr. Henry Pitman of Manchester, Mr. W. Hume-Rothery of Cheltenham, and Mr. William White, Dr. W. J. Collins, and Dr. Nichols of London, in which this power of sanitation as the only scientific antidote, a power so long and so blindly disregarded by the vaccine propaganda, has continuously and consistently been advocated, until at length it is reaching the dimensions of a national belief. Dr. Oidtmann, of the invading army of 1870-1, shows how the Germans suppressed small-pox in the uncleanly casemates of the beleaguered French garrison towns by sanitary regulations; and facts from every part of the civilised world have been brought forward at the various international and general meetings of the Anti-Vaccination Leagues, showing that even in infected cities the rule is constant that in the parts where the houses are well constructed, on elevated ground, the streets wide, and the surroundings healthy, the small-pox stands aloof. The latest of the great small-pox epidemics, that of Montreal, in which the proportionate numbers of vaccinated and unvaccinated sufferers have not at present reached the public eye, tells the same tale of municipal neglect, and teaches the same lesson of the supreme value of municipal cleanliness. The late Dr. W. B. Carpenter of London, the well known vaccine advocate, who made personal researches in Montreal after a previous small-pox epidemic in 1874-5, declared in his controversial pamphlet addressed to the House of Commons in defence of compulsion that vaccination was so well carried out in the above-named city in the year 1883, that "small-pox had become almost entirely extinct." Then came the great epidemic of 1885, of which the New York Church Press says, "Small-pox is a filth disease, and Montreal has for years been one of its abidingplaces." This conclusion is confirmed by a medical resident of the Canadian city, Dr. Alexander Ross, who says, "Ninety-five per cent. of our small-pox deaths have occurred in the filthy lanes and alleys of the east end of the city." Can any facts be more convincing?

Devonshire Club, St. James's, London, June 10th, 1886. Yours faithfully, WILLIAM TEBB.



# VARIETIES.

CHRYSAROBIN AND SALICYLIC ACID IN PSORIASIS.—Dr. George Henry Fox, in the second edition of his Photographic Illustrations of Skin Diseases, speaks of a combination of chrysarobin, salicylic acid, ether, and collodion for the external treatment of psoriasis. The formula which he advises is as follows:-

> Chrysarobin, 10 parts. Salicylic acid, 10 parts.

Ether, 15 parts.

Flexible collodion, 100 parts.

This combination is known at the New York Skin and Cancer Hospital as the Compound Chrysarobin Pigment. Dr. Fox speaks very highly of this treatment. Chrysophanic acid causes more staining of the integument, and sometimes excites a pretty severe dermatitis, besides injuring clothing. This combination does not produce these unpleasant results .- (Journal of Cutaneous and Venereal Diseases. No. 8, vol. iii )—Practitioner.

PUMECE-STONE IN PITYRIASIS VERSICOLOR. — Of the numerous remedies proposed for the cure of this affection, such as the lotions of nitric acid, of sulphur, and of borax, the pomades of mercury and tar, none rivals a soap made from pumice-stone in destroying the Microsporon. The action of the alkali contained in the soap upon the skin, together with the mechanical effect of the powder of pumicestone, is certain to produce the desired result. Prolonged frictions should be made morning and night, with soap prepared according to the following (Vigier's) formula:-

> Black soap, lb. ij. Pumice-stone, lb. ss.

Mix carefully.—(Therap. Gazette, July 15, 1885; Journal of Cutaneous and Venereal Diseases, No. 10, vol. iii.)—Practitioner.

### MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Baker (H. F.). Practical Notes on the Treatment of Deformities. Pp. 80. (Stanford. 5s.)
Biddle (J. B.). Materia Medica and Therapeutics, for Physicians and Students. New edition, revised and enlarged, with special reference to Therapeutics and to the Physiological Action of Medicines. By Drs. Biddle and Morris. Pp. 524. (Philadelphis. 20s.)
Braithwaite (J.). The Retrospect of Medicine. Vol. 98. Pp. 424. (Simpkin. 6s. 6d.)

6s. 6d.) Bruce (J. M.). Materia Medica and Therapeutics: an Introduction to the

Therapoutics: an introduction to the Rational Treatment of Disease. 3rd edition. Pp. 592. (Cassell. 7s. 6d.) Brunton (T. L.). On Disorders of Digestion: their Consequences and Treatment. Pp. 400. (Macmillan. 10s. 6d.) Gynecological Society, the American. Transactions, 1885. Vol. 10. Pp. 357. (New York. 25s.)

(New York. 25s.) Hambleton (G. W.). What tion? (Churchill. 2s. 6d.) What is ConsumpHarley (G.). Inflammations of the Liver and their Sequels: Atrophy, Cirrhosis, Ascites, Hæmorrhages, Apoplexy and Hepatic Abscesses. Pp. 142. (Churchill.

Heath (C.). Dictionary of Practical Surgery. By various British Hospital Surgeons. 2 vols. Pp. 1850. (Smith and Elder. 32s.) Elder.

Elder. 32s.)

Hill (B.) and Cooper (A.). Student's Manual of Venereal Diseases. 4th ed. Pp. 126. (Lewis. 2s. 6d.)

Macdowall (C.). Short Note on Peritoncoclysis, Hypodermeelysis, and Vestcoclysis in Cholera. With Engravings
Pp. 26. (Churchill. 1s.)

Niblett (S. B.) A Practical Treatise on 
Consumption, Lung Disease, Asthma, 
and Chronic Bronchitis. New and revised edition. Pp. 30. (Simpkin. 3s. 6d.)

vised edition. Pp. 80. (Simpkin. 8s. 6d.)
Oliver (G.). On Bedside Urine-Testing:
a Clinical Guide to the Observation of
Urine in the Course of Work. Pp. 254.
(New York. 6s. 6d.)

Squire (P.). Companion to the Latest Edition of the British Pharmacoposia. 14th edition, trevised by Peter Wystt Squire and Aifred Herbert Squire. Pp. 550. (Churchill. 10s. 6d.) St. Thomas's Hospital Reports. With Plates and Engravings. Vol. 14. Pp. 383. (Churchill. 7s. 6d.) Waring (E. J.). A Manual of Practical Therapeutics considered with Reference to Articles in the Materia Medica. Edited by Dudley W. Buxton. 4th ed. Pp. 666. (Churchill. 14s.)

Ziemasen (Von). Handbook of General Therapeutics. 7 vols. Vol. 5. Pp. 640. (Smith and Elder. 16s.)

#### SHORT NOTES, ANSWERS TO CORRESPONDENTS, EIC.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester Road, South Kensington, S.W.

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

Mr. Ivarrs.—Letter too late for this month.

#### CORRESPONDENTS.

Communications received from Dr. Shackleton; Messrs. Leath and Ross; Mr. Ivatts, Dublin; Dr. Gutteridge, Bradford; Dr. Murray Moore, New Zealand; Dr. Winterburn, New York; Mr. Kernshaw, Belfast; Messrs. Kimpton, London; Dr. J. D. Hayward, Liverpool; Dr. J.W. Hayward, Liverpool; Dr. Duageon, London; Dr. Hughes, Brighton; Dr. Herring, London.

#### BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische Zeitung.—Zoophilist. — Medi-Advance.—Monthly Homosopathic Review. — Revue Homœopathique Belge.—Homöopatische Monatsblätter.-New York Medical Times .-American Homoeopathist.-St. Louis Periscope.—Medical Current. — Clinique. — Medi-Visitor.—Chemist Druggist.—La Reforma Medica. - TheGuide. — Revista Hom. Catalana.—Hahnemannian Monthly.—Bibliothèque Homœopathique. — Medical Era.—Medical Annals.—California Homeopath.—The Clinical Review.—Homeopathic Physician.—North American Journal of Homosopathy .-Homosopathic Recorder.—Medical Counselor.—L'Art Medical. — Chironian. — St. Louis Medical Journal.—Medical Investigator. — Albany Medical Annals.—Homoeopathic Journal of Obstetrics. - Clinical Review.—Southern Journal of Homcopathy.—Calcutta Journal of Medicine.—The Builder. -Sydenham and Penge Gazette.—Medical Annual. Dr. Percy b<del>y</del> Wilde. Kimpton.—Millspaugh's Medicinal Plants. Fasc. IV. The Clinic.

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#### THE

# HOMŒOPATHIC WORLD.

## AUGUST 2, 1886.

#### HISTORY OF THE LEAGUE.

Hearing that the Board of Management of the London Homeopathic Hospital was holding an extraordinary meeting to discuss, among other matters, the distribution of the Prize Essay, and the means of advancing homeopathy, the Committee of the League, understanding that such action would be agreeable to the Board, decided to send a deputation to wait upon the meeting. The following memorial was drawn up and read to the meeting; and as it embodies succinctly the history of the League, we have thought well to reproduce it thus prominently to our readers:—

Memorial of a Deputation from the Homosopathic League to a Special Meeting of the Board of Management of the London Homosopathic Hospital, convened June 30th, 1886.

Gentlemen,—The Committee of the Homcopathic League having learned that it would be agreeable to this meeting if a deputation from the League should wait upon you to explain the present condition, prospects, work, and aims of the League, it was decided that such a deputation should be sent, and that a memorial should be presented.

It may perhaps be as well to go back to the very beginning of the movement, which dates from early in October of last year, and an account of which is given by Dr. J. P. Dake, of America, in the December numbers of the *Homocopathic Review* and the *Homocopathic World*. At a dinner given by Dr. Dudgeon to Dr. Dake previous to his return to America, Dr. Dyce Brown and myself being present to meet him, the conversation turned on the present condition of homocopathy in Great Britain, and it

was found that all present were agreed that the time had gone by when it was of any use to appeal to the profession, and that henceforth, if homoeopathy was to advance, we must appeal to the people. Nor were we alone in this opinion. In conversation with many persons, both lay and medical, we found a general consensus of opinion that some popular movement should be started. In order to ventilate the matter, and, if possible, give some practical shape to this opinion, a meeting of the supporters of homosopathy was called at the Hospital, by the Hospital authorities, to consider what should be done. The idea of those who favoured such action was that an Association should be formed on the lines of the English Homocopathic Association of 1847, which, after a prosperous career, ended in the founding of the London Homosopathic Hospital. Many were found to favour this idea at the meeting, but a few strongly deprecated action of any kind, and the meeting terminated without any definite resolution having been arrived at. It was simply determined to postpone the question till some future time.

Indirectly the meeting had one practical result: it led to the generous offer by Major Vaughan Morgan to give a prize of twenty-five guineas for the best essay on Homosopathy.

But those who felt most strongly the necessity of active efforts did not consider themselves bound to remain inactive in consequence of the opposition shown at the meeting. articles and letters appeared in the Homocopathic World and Homocopathic Review from December onwards, discussing the question. In the January number of the Homocopathic World it was proposed to call the new Association the Medical Reform League, with certain objects and rules. Dr. Roth at once put £5 into the hands of the editor, and several other subscriptions were given and promised. A committee was formed, comprising Drs. A. C. Clifton, Roth, Dudgeon, and J. H. Clarke, hon. sec., and it was determined to expend the money in publishing and distributing the pamphlet by Dr. Dudgeon entitled Medical Boycotting. The next step was to call a meeting of those known to be favourable to the forward movement. This took place in February, and there were present Drs. Pope. Dyce Brown, and Mr. Harris, as well as the members of the original committee. The name was much discussed, and it was resolved to form a provisional committee to make arrangements for future action and to decide upon the name. The result was that the Association has been called the Homoopathic League.

The Provisional Committee issued a circular to all medical men and chemists whose names were in the Homeopathic Directory, and the amount of approval and support received was most encouraging.

There is no need to detain this meeting with all the details of the movement; it will be enough to state the results. At the time of writing we have on the roll of the League 251 members. Of these, 62 are medical men, 34 chemists, and 156 of the laity. We have a subscription list of about £60 in addition to a number of promises. And we have not been idle. Considerable expense has necessarily been incurred by the issue of circulars and the like to start the movement; but that does not constitute all our work. We have issued a series of tracts, some of which we have the honour to lay before you on the present occasion, of an educational and popular nature, which we think must command the approval of every unbiased person. tracts, it will be seen, are issued in the name of the League without any author's signature, so that they may be free from any appearance of a desire for notoriety on the part of any one.

Such, gentlemen, is a sketch of the origin, rise, and progress of the Homocopathic League; such are our works, and we submit them to your judgment. Our aim is—second to our great aim, the making known of the claim of homosopathy to be the only scientific method of using drugs, and the vindication of the memory of Hahnemann and the rights of his disciples; -our next aim is, to retire from business! Hitherto we medical men have done nearly all the work—the organising, the managing, and the writing as well. But we assure you, gentlemen, we have a great objection to work; and if any gentlemen present are more happily constituted we shall be only too thankful to hand over to them this vigorous little Association to be nursed The new movement is essentially a people's and managed. movement, and it ought to be in the hands of a lay committee. This its promoters felt from the outset, but they did not see how they could ask a lay committee to take it in hand before it had some substantial existence. We have, happily, secured the services of a lay secretary, Mr. Edwin Laurie, an enthusiastic homoeopath who has the double advantage of being the son of a homoopathic doctor and yet not a doctor himself; and as soon as the present committee can find lay successors they will thankfully retire into private life, and do the bidding of the Committee with all the zeal and ability they can command and, as far as possible, will do their work unseen. The advising and the writing, and the speaking if need be, we are very willing to do; the organising, managing, and direction of the movement, others can do much better than we; and it is in the hope that we may find gentlemen present able and willing to undertake this part of what we believe to be a noble work for Truth and Justice—which are the words of our motto—that we wait upon you on this occasion.

# NOTES.

#### THE CONGRESS AT BÂLE.

ONE of the chief reasons why our Belgian confrères thought that the Congress ought to be abandoned for the present year was the dearth of material. It was somewhat early for them to take alarm on that score. Happily, there will be no dearth, but rather an embarras de richesse than otherwise. Histories and essays, we learn, continue to come in. In addition to those mentioned in our last number, there is the History of Belgium, by Dr. Lambreght, file; of Switzerland, by Dr. Brükner; of Spain, by Dr. Garcia Rubio; of Denmark, by Dr. Oscar Hansen, of Copenhagen, who also sends a paper on "Sepia in Pulmonary Affections." There will be a paper by Dr. Byres Moir on "Kali Bichrom. in Eye Diseases," and one by Dr. Galley Blackley on "Some Points in Cutaneous Therapeutics." On the Wednesday there will be a sectional meeting, at which Mr. Wyborn will read a paper advocating an International Homoopathic Pharmacopoia.

# ROUTES TO BÂLE.

Dr. Hughes finds that return tickets at single fares are not issued unless a party of not less than sixty travel by the same train. As it happens, however, Messrs. Cook have an excursion to Paris on the 31st, via Newhaven and Dieppe, and they will book through to Bâle at £4 5s. first class, and £3 3s. second class, return. But whether members decide to go by this train or not, they are strongly advised to apply to Messrs. Cook, who have promised that they shall receive every consideration possible.

#### THE PLACE OF MEETING AT BALB.

THE place where the Congress will hold its sessions is about ten minutes' walk from the Central Station, closely adjoining which are three first-class hotels—the Schweitzerhof, Euler, and Victoria—at any of which members may stay and get bed and breakfast. We shall probably dine together at the place of meeting; but this cannot be settled until Dr. Hughes has conferred on the spot with Dr. Brükner and the proprietors of the hall.

#### OUR BELGIAN FRIENDS.

WE regret to find that our Belgian confreres have misunderstood the remarks we made relative to the meetingplace of the Congress. What we intended to say was this: that the Belgian Committee, owing to the scanty response accorded to their circular, deemed it impossible for a successful Congress to be organised at Brussels. Nothing could be further from our intention than to describe the Committee as "incapables," which we certainly did not, though we have been interpreted in this sense. But even had we been guilty of such discourtesy, we do not think that that would constitute a valid excuse for the refusal, on the part of the Belgian Committee, to sanction the meeting of the Congress at Brussels, when the Permanent Secretary, Dr. Hughes, had offered to undertake the work. This is not a British Congress, and whatever we may say matters little (unless, indeed, we speak the mind of all). In the June number of the Revue Homaopathique Belge Dr. Martiny maintains that his Committee had already executed the most difficult part of the work. We fail to see the force of this. They had issued a circular, it is true, but what else they had done is not very apparent. It does not appear that they had made any effort to secure histories from the different countries—a most important part of the work,—and the results of their labours, as stated in their second circular, when compared with the results that have already followed the labours of Dr. Hughes, may be left to speak for themselves as to who has performed the most difficult part of the work.

## Dr. Weber.

DR. MARTINY translates a letter that appeared in the All-gemeine Homocopathische Zeitung, from the pen of Dr. Weber,

of Cologne, endorsing the action of the Belgian Committee. Dr. Weber's letter cuts at the root of our Quinquennial Conventions. If our Continental brethren object to the plan they should have spoken sooner. We have taken their silence to mean consent. Dr. Hughes, as Permanent Secretary, was in duty bound to see that the behests of the last Congress were carried out. He could not do more than he has done, and to ask of him, as Dr. Martiny does, a guarantee of success, is to ask what no mortal can give. response he has met with, in the way of communications, is most encouraging, and we hope that Drs. Weber and Martiny, and many others who have thought that the Congress would have been better postponed, will do their best to make it as great a success as possible now that it will certainly be We can assure them that we do not doubt for a moment that they have acted, as they believed, for the best; and we have not the smallest intention of spoiling the coming Congress in any way by references to past misunderstandings.

### A GOOD RESOLVE.

THE annual gathering of Swiss homoeopathists had been arranged to take place at Constance in September; but it has been resolved by our Swiss confrères to forego their own meeting and merge it in the International Convention at Bâle.

## WELL DONE!

At the meeting of the American Institute of Homosopathy at Saratoga, U.S., Dr. Hughes's circular having been read by the President, a subscription was set on foot towards the expenses of the Bâle Congress; and in less than half an hour 170 dollars (£34) were collected. Hahnemann's greatest monument, it has been truly said, is in America. We hope to have the privilege of shaking hands with many of these subscribers at Bâle.

THE CYCLOPÆDIA OF DRUG PATHOGENESY.

WE are glad to learn that the American Institute of Homeopathy, by an almost unanimous vote, has endorsed

the Cyclopædia, and has determined to continue its contribution (for 400 copies) to the end of the work.

#### MAJOR VAUGHAN MORGAN'S PRIZE.

Our readers will be interested to learn that the adjudication of the prize of twenty-five guineas, offered by Major Vaughan Morgan for the best essay on "Medical Treatment, with special reference to the scientific system of Hahnemann," has now been completed, and that the writer of the successful essay is Dr. John Davey Hayward, of Liverpool. Thirteen essays were sent in; one being from the United States, one from Canada, and the remainder being of home production. The majority showed an amount of merit which fully justified the opinion which prompted the offer of the prize, that a short treatise of singular freshness and ability would be forthcoming for general circulation; and Dr. Hayward is to be congratulated on his success in this competition.

COCCULUS INDICUS IN SUFFERING FROM LOSS OF SLEEP.

In a study of this drug, by Prof. A. C. Cowperthwaite, of Iowa City, in the Southern Journal of Homeopathy, attention is drawn to the similarity of the Cocculus symptoms to those arising from loss of sleep. "So also we often get this class of symptoms in the result of loss of sleep, which always weakens the Cocculus patient excessively. They cannot sit up more than an hour or two beyond their usual bedtime. If they do they are languid and weary the next day, and feel as if they had lost a whole night's sleep. Cocculus is the remedy for the bad effects of loss of sleep, especially on nurses, or those who are watching with the sick. There is another concomitant symptom usually found with those symptoms, and that is a sensation of hollowness in some of the cavities of the body, either in the head, chest, or abdomen. It is more than weakness, a feeling as if the body was absolutely hollow—as if there were a great cavity inside instead of the viscera." The vertigo of Cocculus is thus described: "The patients complain of a great deal of vertigo and dizziness, which when they attempt to sit, or when they are raised from a reclining position, becomes associated with nausea and inclination to vomit, and even fainting. The same symptom is found in Bryonia, but then it does not result from spinal weakness."

#### BACTERIUM TERMO v. BACILLUS TUBERCULOSIS.

It will be remembered that some time ago a great sensation was made by the announcement in a daily paper that a patient was nearly cured of consumption by the inhalation of a spray containing bacteria which were supposed to neutralise the bacilli of tubercle or consumption. A letter appeared in the Chemist and Druggist of June 26th from Mr. W. B. Capper, narrating the effect in a case in which he had tried the treatment. It is not likely that the experiment will be repeated very often. He says:

"I regret that in my anxiety to aid suffering humanity I was led to hold out hopes which—as far as have been tested in this one case—I must say have not been fulfilled. This was proved by the fact that after being without the bacterium for four weeks, during which time the appetite and general health had improved, when again resorting to its use, and after only three inhalations, the system was completely disorganised—loss of appetite, furred tongue, and total prostration. So far as this case is concerned, I can only say the bacterium cure has been abandoned, and the patient, my sister, has recovered from the relapse occasioned by the use thereof."

# INTERNATIONAL HOMŒOPATHIC CONVENTION, BASLE, SWITZERLAND, 1886.

### PROVISIONAL PROGRAMME.

## Monday, August 2nd.

A PRELIMINARY meeting will be held at 8.30 p.m. for the election of officers and adoption of rules of procedure.

## Tuesday, August 3rd.

The Convention will assemble at 9.30 a.m., and sit, if

necessary, till 1 p.m.

The quinquennial reports from the various parts of the world will be presented, and the meeting will be addressed by physicians belonging to the several countries represented at the Convention. Thereupon will follow a discussion on the present state and future prospects of homeopathy, and the best means of furthering its progress, based on a paper by Dr. Dudgeon, of London, entitled En Avant!

In the afternoon, at 3 o'clock, a Sectional Meeting will be held, at which a paper on Hygiene, by Dr. Roth, of

London, will be read and discussed.

## Wednesday, August 4th.

The Convention will meet in the forenoon as on the day before.

The first volume of the Cyclopædia of Drug Pathogenesy will be presented to the meeting by its editors, with an exposition of its claims to be the future Materia Medica of Homeopathy. A discussion will then be taken on the subject, based upon papers relating to it by Dr. Imbert Gourbeyre, of France, Dr. T. F. Allen, of New York, and Drs. Drysdale and Hughes, of England.

At the close of this discussion, a paper on *Nicotism*, by Dr. Clarke, of London, will be presented and debated on.

In the afternoon, at 3 o'clock, a Sectional Meeting will be held, to hear and consider A Plea for an International Pharmacopæia, by Mr. Wyborn, F.C.S., of London.

## Thursday, August 5th.

The Forenoon Session will be held as usual; and the following papers will be presented and discussed:—

Diabetes Mellitus; by Dr. Theodore Kafka, of Karlsbad.

Ear Disease and Gout; by Dr. Cooper, of London.

La Psore Meningée Cérébrale; by Dr. Boniface Schmitz, of Antwerp.

Sepia as a Pulmonary Remedy; by Dr. Oscar Hansen, of

Copenhagen.

A Case in which Measles and Diphtheria combined to complicate Whooping-cough; by Dr. Midgley Cash, of Torquey, England.

Kali Bichromicum in Eye Disease; by Dr. Byres Moir, of

London.

Some Points in Cutaneous Therapeutics; by Dr. Galley

Blackley, of London.

An Afternoon Session will be held at three o'clock, the first business of which will be the selection of a place of meeting for 1891; after which anything which may remain of the morning's programme will be taken up, and the whole concluded by an address from the President.

The Permanent Secretary, Dr. Hughes, will attend throughout the Monday afternoon at the Hotel "Schweizerhof" to enrol members and give all necessary information, supply precis of the papers for discussion, etc.

The Members of the Convention, with ladies accompany-

ing them, will dine together sans cérémonie on the Tuesday, Wednesday, and Thursday evenings; and on each occasion suitable toasts will be proposed.

# ORIGINAL COMMUNICATIONS.

#### PURPURA.

"At the annual meeting of our State Society this year," says Dr. Winterburn, "the topic of Materia Medica of Hæmorrhage was selected as one of the special subjects for study, and to me was assigned the duty of writing up so much of that topic as pertained to purpura hæmorrhagica." Accordingly Dr. Winterburn set himself in the most businesslike way to write it up. Discovering that he knew very little about the subject, he wrote to a large number of his medical friends and acquaintances to ask for their experience with the disease; and in response he received the records of a goodly number of cases of very great interest and value. These he has put together along with some of his own, and in the natural course of events his paper for the State Society has become a volume of 240 pages. And a most useful volume it is. Dr. Winterburn is a worthy representative of the more exact school of homeopathists, and the manner in which he has worked out the different remedies he treats of. and shown their bearing on purpura, and on hemorrhage and hæmorrhagic conditions generally, is truly admirable.

Dr. Winterburn mentions among the varieties of the disease—(1) Purpura simplex, the mildest form, seen in persons past middle life, and hence called also Purpura senilis. This occurs principally on the limbs in minute red spots after exertion, and disappears if the patient takes a few days of absolute rest; (2) Purpura Hæmorrhagica, the morbus maculosus of Werlhof, an exceedingly grave disease, marked by copious hæmorrhages into the tissues, under the skin and mucous membranes, and at times on the free surfaces; (3) Purpura Rheumatica, which is preceded or accompanied by pains in the joints like rheumatism, and a variety of this in which there are severe attacks of vomiting, colic, and the

passage of bloody stools.

Phosphorus is the remedy which holds the first place in the treatment of Purpura. The power of the drug to produce

hæmorrhage into the tissues is perhaps more marked than that of any other. Among the concomitant symptoms Dr. Winterburn gives the following:

Sadness recurring regularly at twilight.

Great timidity associated with a sense of extreme fatigue. Over-sensitive to external impressions: light, odours, noises, contact.

Difficulty of falling asleep; followed by frightful dreams. Sensation of weakness and emptiness in the abdomen.

Great longing for acids and spiced things.

Constipation; the fæces being slender, long, dry, tough and hard like a dog's; voided with great difficulty.

Hæmorrhoids, burn like fire and bleed profusely.

Glycosuria. Albuminuria.

Palpitation of the heart even while sitting.

Remarkable paleness of the skin and mucous membranes.

Lips and eyelids ædematous.

Nose-bleed and other hæmorrhages.

Slight wounds bleed easily.

Ataxic symptoms with cardiac and respiratory derangements.

Aggravations.—Changes in the weather and emotional excitement are apt to have a depressing effect on the phos-

phorus patient.

Relationships.—Phosphorus is best suited to elderly persons rather than to children, unless these have grown rapidly; to fair-complexioned persons of sensitive disposition and quick perceptions.

Here is a case treated with *Phosphorus*, reported by Dr. C. W. Boyce in *American Homocopathic Review*, June, 1865.

"Gertrude Clark, aged seven, was a perfectly healthy child, who had never been sick since she was born until the present disease. About March 12th, 1865, the pillow on which she had slept at night would be found in the morning somewhat stained with blood. After a few days she began to spit bloody saliva, and on examination, March 17th, she was found to have small spots of extravasated blood all over the body. When she had the least hurt there would immediately follow a large spot in the vicinity, which would be quite black from the extravasated blood. Any little scratch bled profusely and continuously. The accidental scratch of a pin would bleed so as to saturate cloth after cloth. Little red points appeared on the tongue and on the whole buccal

cavity, and these oozed continuously. Blood settled beneath the conjunctiva, and the eyes appeared entirely bloodshot. The breath became peculiarly offensive. The discharge from the mouth of blood-saliva was filled with shreds of decomposed and disorganised blood. The pulse was regular but quick. The appetite was good, and she slept well. She was inclined to play, and only became exhausted after considerable exertion. She had been entirely well before, for all that her parents had seen, and, but for the blood, they would not have at first known that anything was the matter. This was the condition on March 17th. It had been five or six days coming on. The appearance was frightful; even ordinary handling would leave the marks of the fingers as though a powerful blow had been struck on the child, and these spots were inclined to extend indefinitely. A slight knock from a doll baby's head involved the whole eye and its surroundings in a black unsightly spot. All the secretions were bloody.

"On investigating the case, several remedies presented claims for use, but Hahnemann's great characteristic indication for *Phosphorus*, 'small wounds bleed much,' led to the investigation of this remedy; that and the following symp-

toms were found to correspond:

"Small wounds bleed much.

"The gums bleed from small causes.

"Much bleeding from the nose from exertion, and especially when straining at stool.

"Blows much blood from the nose.
"Swelled and easily bleeding gums.

"The saliva is bloody mucus.

"Great discharge of blood from rectum at stool.

"Expectoration of bloody mucus.

"Extravasation of blood from all the tissues.

"Vicarious hæmorrhage.

"So many of the symptoms were found in Phosphorus that

it was given in the case.

"March 18th. Up to this time the homorrhagic condition had grown rapidly worse. So very weak had she become that she tottered when attempting to walk, and she was obliged to sit down. For twenty-four hours after the *Phosphorus* was given there was no change in the condition. This dose held the case exactly the same.

"March 19th. Phosphorus was again given. Immediately the disease began to diminish, and the blood disappeared

as it had appeared. Thus two doses of Phosphorus 200

cured this really dangerous case."

A strikingly typical case is contributed by Dr. Angell, occurring in a young girl; but it is too long for us to quote. Dr. Winterburn thus sums up the reasons why *Phosphorus ought* to have been given at the outset:—"The temperament of the patient: black hair; dark eyes; clear, pale complexion; vivacious disposition; the inherited tendency to hamorrhage, resembling her mother in this; the frequent headaches and the present dizziness; the menses as a rule too early, too profuse, and too long in duration, with colic and pains; the eczema succeeded by blood-boils upon the skin and blood-blisters in the buccal cavity; the severe hamorrhage from the nose; and the copious and prolonged bleeding from small wounds—taken together form a vivid picture of Phosphorus."

The three cases of Dr. Winterburn's own were cured by

China, Rhus, and Sanguinaria respectively.

#### THE CHINA CASE.

The first was a woman, aged 37; she had been confined a year before and had lost an enormous amount of blood. She had been dosed heavily with quinine. She had, when Dr. Winterburn first saw her, intermittent fever, for which several remedies were given. On the 16th day of treatment the menses came on profusely and continued, then ecchymoses appeared on the thighs. On the 22nd day her condition was as follows:—

"The ecchymoses have spread considerably, the old ones enlarging and many new ones forming. Her face is shrunken and livid, with eyes surrounded by heavy blue lines; sight dim and uncertain; noises in the ear like distant bells; very apathetic, and either does not reply at all to questions, or slowly as if she did not fully comprehend; desires continually cold lemonade, and refuses milk and the beef-tea, which disagree, causing eructations; urine scanty, turbid, and with a red-brown sediment; diarrhose of bloody mucus, scanty, infrequent, painless; she wants to be bolstered up in bed, on account of oppression in the chest, when lying down; skin cold, clammy, and greasy; temperature (axilla), 103.4°."

Phosphorus had been given and was doing no good. After a careful re-study of the case, Dr. Winterburn came to the conclusion that China was the only medicine that could save

his patient, and in spite of the former overdosing with sulphate of quinine, he determined to give China. The following symptoms of China determined the choice:—

Indifference, apathy, ill-humour.

Dislike to all mental or physical exertion.

Slow train of ideas.

Intense throbbing headache—after loss of blood.

Sight dim and faint.

Fine ringing in ears.

Hardness of hearing, humming in ears.

Nose-bleed, ringing in ears, face pale.

Face pale, hollow or livid, blue around the eyes.

Hippocratic.

Longs for sour, cooling things.

Violent thirst for cold drinks.

Sour eructations after milk.

Heartburn after milk.

Hæmatemesis; weak, pale, cold.

Stools—bloody, painless.

Urine—turbid, scanty, depositing brick-dust sediment.

Uterine hæmorrhages, ringing in ears, fainting, coldness, loss of sight; discharge of dark clots.

Menses dark, coagulated; or pale and watery, with dark coagula.

Cannot breathe with head low.

Hæmoptysis,

Fever, long-lasting and coming on at irregular intervals.

Sweat, partial cold or profuse, greasy.

Hæmorrhages from mouth, nose, or bowels; wants sour

things.

Six pellets of Carroll Dunham's China 200 were given every four hours. In the first 24 hours only an improvement in the bowels was noted; on the 23rd, the day following, the mental state was altered for the better to a wonderful degree; temperature 100. She took nourishment freely, slept well, and had no perspirations. She steadily improved from that time forward and recovered completely.

# THE RHUS CASE.

The Rhus case was one of the rheumatic variety, the patient being a carpenter, aged 29. Glonoine was given at first on account of a highly characteristic headache, which yielded to the remedy; but the petechiæ, hæmorrhages, fever,

and rheumatic pains did not disappear. Under Rhus Venenata 30 the patient rapidly recovered.

### THE SANGUINARIA CASE.

Perhaps the Sanguinaria case is as interesting as any.

"Mrs. E. F. H., a widow, aged 63, a former patient of my father's, but whom I had not seen for some years, applied for treatment on the 17th July of this year (1885), for a peculiar form of rheumatoid pain in the hands and forearm. had been a rheumatic subject for a score or more of years, but the pains had formerly been in the shoulders and in the neighbourhood of other large joints. She had, at this time, no pain above the elbow, the rheumatism having confined itself to the parts below that point and to the feet for about eight or nine months; but the right shoulder was permanently crippled by the former attacks, and so stiffened that she could not bring the hand on that side to her head, and all backward movement was greatly abridged. Digestion was, and had been for years, greatly enfeebled; still she could, with care, prevent any serious attack of dyspepsia. The bowels were, naturally enough, torpid; but she had two or three fairly good stools each week, unless she permitted her stomach to be overloaded with food difficult (for her) of digestion; which indiscretion was usually followed by a sharp attack of diarrhea. For some time the pains in the hands had been growing more and more severe, until at last, having passed a distressed and restless night, she applied for relief very early in the morning of the day already mentioned. of the joints of the right hand and three of the left were swollen, hot, and painful; she described the sensation 'as if they were on fire.' The actual local temperature was not much increased, as far as I could judge by contact, and the bodily temperature was even slightly sub-normal, but the subjective sensation was one of violent heat in the painful parts. With this was a tired feeling and a sense of weakness, which may have been mainly due to the loss of sleep. was a noticeable exacerbation of pain about sundown, which continued until mid-forenoon, when there would be considerable A study of the stomach relief until again in the afternoon. symptoms showed a rather indifferent appetite, though a sufficiency of food was ingested. An excess of fatty or richly nitrogenous food caused burning pains in the stomach, slight nausea never going on to vomiting, regurgitations, and eructations; this being followed, as I have already

said, by papescent or liquid stools. She was naturally of a very bright and sunny disposition; but it seemed to me, from the remarks she let fall about her surroundings, the people she lived with, and other matters, that she was in a rather querulous mood. The whole case reminded me so forcibly of Sanguinaria that I decided to give that remedy in the 6th decimal trituration. Sanguinaria has the following symptoms:

Very irritable and morose, and impatient at the least

trifle.

Irritability; she could break things to pieces without the least cause.

Appetite much impaired.

Loss of appetite with uncertain cravings.

Aversion to butter.

Violent, though transient, gastrodynia.

Spasmodic eructations, frequent eructations of a bad odour, eructations of wind from the stomach.

Regurgitation and disposition to vomit.

Bitter vomiting; it sometimes occasions vomiting, but more especially burning at the stomach.

Slight nausea, with a burning at the stomach.

Disagreeable sensation at the stomach; sensation as of indigestion; heavy, dull sensation, with qualmishness, eructations, and very disagreeable feelings in the stomach.

Burning sensation in the stomach.

Stools soft (first days), hard (latter days).

Five natural evacuations in one day.

Rheumatic pain in the right shoulder.

Violent pain in the shoulder-joint.

Rheumatic pain in the right forearm.

Redness of the hands and violent burning.

Violent pain in the right hand close to the index finger. Ulcerative pain in the right thumb, afterwards in the

left, then extending to all the fingers one after another.

Cutting pains in the joints of the finger. Burning pains in the feet, worse at night.

Sensation of weariness and lassitude throughout the system.

Great weakness; very great prostration of strength.

Most of the conditions aggravated in the evening or at night.

"As I was preparing the medicine we conversed on various topics, in the midst of which she incidentally called

my attention to a peculiar condition of her skin. About the wrist, and extending upward to the elbow, in the region of the clavicle, upon the thighs, and on the dorsum of the feet and balls of the toes, were little round and roundish purpuric spots, varying in diameter from the sixteenth to half an inch, but mostly quite small. They were painless, were unaffected by pressure; each lasted several days, gradually fading like a bruise, and were most profuse on the right side of the body, and on the posterior portion of the limbs. This had been going on for several years, now better, now worse, but never quite disappearing, and on the whole being more definitely pronounced, and larger in size, season by season.

There was no history of hæmorrhages.

"I remembered Dr. Decker's case, as it very much interested me at the time it was read, at the Ithaca meeting, and wondered whether Sanguinaria would show any effect here; but, as I did not know of the purpuric spots at the time of deciding upon the remedy, these had no influence in the selection of Sanguinaria. I saw nothing further of this patient for five or six weeks, when she called to report that the medicine had helped her very much, and to say that she had had during the past month less rheumatism than for any like period for years. The purpuric spots had completely vanished, and have not, up to this date (four months) returned. She has now only transient rheumatic pains, rarely severe enough to cause actual suffering, but the affected joints remained enlarged and stiff. She still takes a dose of Sanguinaria whenever she has a paroxysm, and it seems to quickly lull the pain; she has taken no other remedy whatever since the middle of January last."

Dr. Winterburn deals in like interesting manner with Crotalus, Lachesis, Arsenicum, Secale, Hamamelis, Terebinthina, Erigeron, Arnica, Sulphuric Acid, Bryonia, Chloral, Iodium, Kali Hydriodicum, Mercurius, Cuprum Aceticum, Hydrocyanic Acid, Ledum, Berberis Vulgaris, Lycopodium, and Ferrum

Phosphoricum.

Curiously opportune is the publication of a volume of Clinical Medicine by Dr. Jousset, containing several admirable lectures on Purpura. In a future number we hope to give an account of these.



# TWO ARTICLES ON SCHUSSLER'S REMEDIES.

We have put together the two following articles on Schüssler's remedies; one is by an American and the other by a German author, translated with comments by Dr. Lilienthal. We are inclined to agree with Dr. Lilienthal that it is by virtue of their homeopathicity that these remedies act; and we certainly agree with him as to the desirability of having those of them well proved that have not been proved as yet.

#### SCHUSSLER'S REMEDIES.

By Dr. Goullon. Translated, with comments, by Dr. Lilienthal.

Ir there were a specific remedy for noises in the ear, many patients would apply for it, though it may originate from different causes. Hyperæmia and anæmia produce it. Sometimes it is like the vibration of a cord, another time purring and ringing; others compare it to the noise of boiling water, to the humming of bees or the whistle of an engine. One lady had her tympanum injured by a hair-pin, and she compared the noise to the beating of sixty drums; often it may be caused by hardened ear-wax, and ceases after its removal. Silicea, in so many cases an excellent cerebral remedy, failed with me in the removal of these noises.

Schüssler recommends in such cases Kali Phosphoricum. I prescribed it successfully to an old man of apoplectic habitus, who often complained of numbness in his hands, which was usually relieved by Arnica. This summer he suffered from acute articular rheumatism, which was his third or fourth attack; now he seeks relief for noises in his ears, aggravated by noises on the street. As is usually the case in this ear affection, he felt greatly discouraged. After taking for four days the sixth potency of Kali Phosphoricum in water, three times a day a teaspoonful, his former cheerfulness returned and he could hear as well as ever. If Kali Phosphoricum would not have relieved the beating in his ears, Magnesia Phosphorica would have followed.

A young lady has suffered for the last four months from a gastric catarrh, characterised by excessive acidity. She says it ascends like a poison, and boring pains between the scapulæ accompany this excessive formation of acidity, appearing after taking ever so little food, more after breakfast than after dinner, about one or two hours afterwards. All dietetic treatment and all old school torture had so far

only aggravated her suffering, and when they offered to pump it out her patience ceased, though she had lost all her appetite and had a perfect horror of milk, pastry, and other sweet delicacies. As a last resource homosopathy was recommended, and any one half acquainted with the biochemical treatment of diseases knows that the choice must be Natrum Phosphoricum. Schüssler recommends it for the acid diathesis, especially for all ailments produced by an excess of gastric acidity. One little powder sufficed to regulate her digestion; for a week afterwards she joyfully acknowledged her good appetite, and that all acidity is gone. The powder contained four drops of the sixth potency of Natrum Phosphoricum, to be dissolved in half a wineglassful of water, a teaspoonful mornings and evenings. With Clotar Müller, we consider the sixth potency to be our choice and sufficient for nearly all cases. What astonished me most was, when patient related that a few years ago she was also cured of the same acidity by one powder, prescribed by my father, Dr. Goullon, sen., and it was remarkable that she still recollected the name of the remedy, Calcarea Carbonica. Does in the tissue-remedies Natrum Phosphoricum take the place of Calcarea Carbonica? There cannot be two specifics! How can it be explained?—Schwabe's Zeitschrift für Homosopathy, 1, 1886.

So far Dr. Goullon. May we not ask the faculty of Ann Arbor, and the editors of the Medical Counselor, to have Schüssler's remedies proved? They have the material on hand, and their students ought to be willing to undertake this pleasant task. Considering the dozen remedies, they can ascertain easily that there is nothing in them but the constituents of their own body, and it would be the task of the faculty to see to it that such provings are made with all the lights shed upon them by scientific methods. Should the question be raised whether such constituents of our body will produce symptoms on a healthy person, we can point to Silicea, Calcarea, and Sulphur as proofs; still more to Natrum Muriatioum, which we use daily more or less. Let these provings be started with the sixth, and gradually advanced to the thirteenth. There is a bonanza still to be opened, and blessed be those who deliver us the pure ore.

For nearly a decade I have used in my practice Schüssler's tissue remedies, and their prompt action has often astonished me. Dr. Palmer, of this city, read only last year a paper before our Medico-Chirurgical Society, and urged the fellows

to give them a fair trial, even in severe cases of genuine diphtheria. In rheumatic acute attacks the alternation of Ferric Phosphate with Potassium Chloride, the one in the morning the other in the evening, has shortened many an attack and brought blessings on the doctor! The facts of this beneficent action accumulate day by day. They must act according to the homeopathic principle, and therefore such provings are a necessity; and if the proving fails, it only shows that there are still other laws for drug action than our own beautiful similia similibus curantur. Homeopathy need not fear the trial, and the welfare of our patients is our paramount duty. Tuto, cito, jucunde!—S. Idlienthal, M.D., in Medical Counselor.

# EXPERIENCES WITH BIO-CHEMICALS. By E. B. RANKIN, M.D., Washington, D.C.

WITH many others of my professional brethren, I have until quite recently used the tissue remedies when I had exhausted my knowledge of homosopathy without curing my patient, and almost always have found comfort both for myself and patient in this fertile, but too little explored, field of medicine. These remedies were my standbys in the dysentery of central and northern Texas, and I do not remember of but two cases where I failed to cure with them. I have cured cases of long standing that have come into my hands from practitioners of both the old school and the Eelectic.

If these remedies will help us out in extreme cases, why will they not do for the ordinary everyday run of cases? If the theory is true, it is a much more simple mode of prescribing, and saves much time and trouble in hunting for the similia. During the last winter I have studied these remedies as never before, and have been fully repaid for the time and labour employed. In order to be successful in prescribing them, one must study the indications continuously until thoroughly master of them, and then there will be no trouble in individualising. Any one can make a chance hit where the indications are perfectly plain, but to use the remedies in daily practice requires considerable thought.

I have become convinced of the fact that the action of these remedies is not homosopathic. The results obtained are due solely to chemical action of the remedy. The action of



the remedy is usually slower than that of the homocopathic

remedy, but the results are fully as permanent.

I do not wish to be understood as detracting from the glory of homoeopathy, the grandest system of therapeutics ever revealed to man, but I do not believe, as do many others, that homoeopathy is the only law of cure.

I will add a few cases from my note-book, which have

occurred in my practice during the past two months.

Mr. I. B. R. has been suffering for some weeks past with nausea, followed by vomiting, which was often accompanied by vertigo. As he was suffering from catarrh of the ear, accompanied by tinnitus arum, I suspected labyrinthian vertigo, and sent him to our aurist, Dr. King, who treated his ear successfully, without in any way affecting the other trouble, which I now diagnosed as of purely gastric origin, and taking into consideration the fact that the substance vomited was nearly always exceedingly acid, I prescribed Natrum Phosphoricum, which immediately controlled both the vertigo and the vomiting, and in about a week's time he reported himself well.

Mrs. H—— has been troubled for two years with diabetes insipidus. She complained of constant backache in the region of the kidneys, general languor, insatiate thirst, loss of appetite; there was no perspiration, the skin dry and harsh, and she passed daily from two and one-half to three quarts of pale, limpid urine. Prescribed Natrum Sulph. 6x, and in one week's time she reported herself very much improved, less thirsty, appetite better, feels stronger, pain in the back nearly gone, and the quantity of urine diminished

by half. This case is still under treatment.

Mrs. A——, suffering from tuberculosis both of lungs and bowels, and occasionally subject to attack of intestinal hemorrhage of greater or less severity, which is generally preceded by wasting diarrhosa. Was called hurriedly to see her the other day, and found that she had just had quite a profuse hemorrhage from the bowels. The vessel was certainly half full of dark blood, thick and viscid. Prescribed Kali Muriat. 6x. The next passage from the bowels contained much less blood, and in forty-eight hours the stools were natural again without any trace of blood, and the constitutional effect of the loss of blood was slight as compared with previous attacks.

The colicky pains of infants generally yield quickly to Mag.-Phos., and, in fact, all pain of a spasmodic character,

also vesical irritation in little children when not due to a

paralytic condition of the sphincter.

Kak Phos. is a grand remedy in all conditions of lowered vitality, especially during diphtheria, scarlatina, typhoid fever, and septicæmia, when the patient seems to succumb to the malignant influence of the poison.

In this manner I might go on enumerating cases where these remedies have done good work. Try them for yourselves, and they will not fail you if correctly prescribed in

curable cases.—Southern Journal of Homeopathy.

# CASE OF OPHTHALMIA CURED BY ARSENICUM, AFTER THE FAILURE OF BELDADONNA.

By Dr. HARMAR SMITH.

MAY 14th, 1886.—Mrs. L., Malvern, aged seventy, has been suffering for about a week from scute ophthalmia of the right eye; the conjunctiva of both the globe and upper and lower lids deeply injected, great intolerance of light, and constant lachrymation. Tincture of Belladonna 1x, one drop every two hours. Had been taking Belladonna 3 some days before I saw her. A Belladonna lotion to be kept constantly applied tepid. The eye to be kept covered constantly with a green silk shade.

March 15th.—Much the same.

16th.—The redness intensified; the photophobia and all the symptoms, both objective and subjective, aggravated. To take Liq. Arsenicalis, one-tenth of a drop every two hours.

17th.—The inflammatory redness completely gone; the intolerance of light, scalding of the tears, and other subjective symptoms greatly lessened. Continue the medicine every four hours.

21st.—Eye quite well, but some general debility. Chin.-Sulph. 1x, a drop three times a day. Discharged cured.

It is somewhat difficult to say what were the special features in this case that rendered Arsenicum so rapidly curative after the complete failure of Belladonna. It is, however, not improbable that the patient's advanced age and feeble condition of general health rendered her more amenable to the curative action of this adynamic remedy than to a more sthenic one. Perhaps we are at times in danger of

overlooking the constitutional state in prescribing medicine for local affections.

There is probably no sphere of its operation that has been so fully proved as the action of Arsenicum on the conjunctiva, no doubt in consequence of the extreme sensitiveness of the eye to medicinal influence. In the early days of my oldschool practice, like the bulk of my colleagues before they had taken so many leaves out of the homeopathic pharmacopæia, I scarcely ever used arsenic except in skin disease, and the ordinary dose and manner of giving it was five drops of Fowler's solution three times a day, directly after meals, and the most frequent troublesome complication of this mode of practice was an attack of medicinal conjunctivitis. the bye, I only a few days ago met with a young lady who had been for some time under allopathic treatment, in whom a whole group of pathogenetic symptoms had been produced by three drops of Liq. Arsenicalis taken twice a day, which had led to her discontinuing its use.

Queen's Road, Buckhurst Hill, June 12th, 1886.

# MISCELLANEOUS NOTES ON THERAPEUTICS.

By A London Practitioner.

Possibly a few notes of a miscellaneous character may not be quite out of place in the pages of the Homgopathic World. If so, I propose to-day to say something on Dynamisation, in part affirmatively, in part interrogatively. I am a Liberal in medicine, disposed to give credit wherever it is due, but in arms against that assumed infallibility which would oppress freedom of thought and of action. The public are the best judges. They will put us right if we are wrong. They will assign to us our proper place in the therapeutic world.

Now homeopathy is not such a simple system of practice as many people suppose. It does not consist alone in the giving of infinitesimal doses of what are called homeopathic remedies. It does not consist alone in an obedience to the law of similars. It does not consist alone in the dynamisation of substances. Homeopathy consists in the blending of all these. Some persons think the first-mentioned constitutes homeopathy; some think the second is homeopathy;

and some, perhaps, espouse the third. They are all wrong, because of the limitation which they impose.

But there is still a fourth constituent. Homeopathy employs many new remedies, some of them of great efficacy.

Now, although all these four specifications go to make up the practice of homeopathy, yet we cannot pretend to trace a definite connection between them. For example, what connection is there between the law of similars and the process of dynamisation—the bringing into remedial activity of substances previously inert? These form two separate and distinct discoveries. As an illustration of each discovery, we may take, first, the action, the double action of ipecac., or of tartar emetic. These produce vomiting, and they cure vomiting, each in its proper sphere. These are examples of the first discovery.

The second is in reality the production, the invention, of an altogether new remedy. For instance, we do not get any therapeutic virtues from chloride of sodium if we give it to those who are accustomed to use it as a condiment with meals. But what startling virtues become manifested by trituration! Of course this dynamised chloride of sodium may subsequently be brought under the law of similars; but

this is another question.

Dynamisation.—This process of developing power by means of trituration is an interesting branch of homeopathy, and the results are very curious. Although the experiments in this science do not captivate the senses like many of the experiments in chemistry, yet to a student of nature's laws, and more particularly to a student of therapeutics, there is much of interest in them. There is a field here opened to him of almost endless experiment. "For," he will reason, "if so much virtue may be educed from this substance and that, why not from that, and that, also?" The famous example of chloride of sodium, and of lycopodium, and of others, are warrant enough for further experimenting.

Whenever we begin to reflect upon the nature and conditions of the phenomena attending the laws of any science, it is surprising how many questions begin to present themselves. For instance, when we rub together chloride of sodium and milk sugar, and thus procure a new remedy, the question will come up: Is this remedial property obtained by the minuteness of the dose which we now get? or does the virtue come through the operation of trituration? The answer to this question does not seem difficult to ascertain. We can

make of chloride of sodium, e.g., both a solution and a trituration. Suppose we make the third centesimal, or any other attenuation, of each; and supposing we find by careful observation that the trituration cures whilst the solution does not; we then know that the virtue, or power, is obtained by the triturating process. On the other hand, if we find the solution has equal efficacy with the trituration, we then know that the efficacy is obtained through the minuteness of the dose. This seems clear, and the experiment is not difficult to make.

In the Homocopathic Review for May, 1879, there is a report of some cases treated and cured by Dr. John H. Clarke with natrum mur. in solution. Prima facie, this might lead us to suppose that the solution will answer as well as the trituration. But here again comes the question whether or not these solutions were made from primary triturations. If they were, then these cases will not help us to decide the question. However, it may be that the editor of this journal will favour his readers with a paragraph on the subject, and possibly clear up the difficulty.

Supposing it should appear that the efficacy is obtained by trituration and not by minute dilution, the question would then be, would the rubbing of chloride of sodium alone produce a remedy having equal power with any of the triturations made with sugar-of-milk? If not, then we must conclude that the addition of the milk sugar produces a

tertium quid.

This question I determined to test as far as I was able, and the following notes were made at the time:—

May 20, 1886.—Began triturating some chloride of sodium to-day.

21st.—Continued.

22nd.—Completed the trituration. It appears to me to

have exactly the same taste as before triturating.

24th.—I have compared this trituration with ordinary salt to-day by tasting both, after a few minutes' interval. I now have the impression that the former has a more pungent taste. A few minutes afterwards felt some griping pains. Took another dose in the evening and again experienced a griping pain.

25th.—Had no other symptom.

June 11th.—Took a few grains this evening and experienced no symptom.

12th.—No symptom.

17th.—Took some with an egg for breakfast instead of the ordinary salt; 11 a.m. found no difference either in taste or effect. I therefore come to the conclusion that it has no more medicinal value than common salt.

To make the experiment more complete I applied a similar test to sugar.

May 18th, 1886.—Began to pulverise and triturate white sugar.

19th.—Continued doing so.

20th.—Completed. Comparison of sweetness. Dissolved 10 grains in 3ij water and swallowed it. A few minutes after dissolved 10 grains of ordinary white sugar in 3ij water and swallowed it. Could perceive no difference in the taste.

21st.—Thought I had some frontal headache this morning. Took another dose of the triturated sugar. At 8 p.m. another dose; headache gone.

22nd.—Another dose. No symptom.

June 8th.—Another dose. No symptom.

Now it may appear to some to be a foolish thing making experiments on triturated salt and sugar; but, on the other hand, it is not always wise to take everything for granted until it has been submitted to tests. Tests may not always be perfect, but repeated tests ought to lead to something like definite conclusions. Fallacies, no doubt, arise, and have to be corrected. If I had attributed a frontal headache to a dose of triturated sugar, I should probably have created a fallacy which would need correction.

I have always regarded the dynamising process as a very curious one. It comes to every student of medicine as a novelty, and as a novelty it is questioned, and usually repudiated. We are so much in the habit of using crude drugs in our earlier years of practice, that to forego the use of them and take up with a trituration containing an infinitesimal dose of some common, or uncommon substance—this is indeed a going to school again after we thought schooldays all over. The idea does not recommend itself to most minds. The fact is, we all like to think we have got a matter settled and disposed of once for all. One set of ideas being upset, who knows but some other new discovery will turn up just as we have begun to get accustomed to the use of triturations and infinitesimals, then we shall be all at sea once more. Thus we reason, consciously or unconsciously.

[There are no grounds for supposing that natrum muriati-

cum, when triturated with milk sugar, forms, with the latter, a tertium quid; for the liquid attenuations of the salt are just as powerful, and act just in the same way, as the triturations. The liquid attenuations are generally made without undergoing trituration in any stage of the manufacture. powers of the high attenuations of substances inert, or nearly so, in their crude state, are very wonderful; but not more wonderful than thousands of other facts which we daily act upon without noticing. That these attenuations do act, the evidence is too strong to be doubted. For our part, we think it would be still more wonderful if substances in a high state of division did act in exactly the same way as the same substances not so divided. We know from chemistry that the free atom—of course a free atom is an inference, no one having seen one, but it is a necessary inference, nevertheless—is endowed with powers of attraction and repulsion not possessed by the atom fixed in a salt. It may be that, by the Hahnemannian process, the molecule in the atom is set free and receives its highest powers in the process. Be that as it may, the fact remains that carbonate of lime and common salt, of which we take comparatively large quantities into our bodies daily without perceptive medicinal effect, when attenuated by Hahnemann's method develop extraordinary powers. There are few medicines which we find more reliable than natrum muriaticum (common salt) in the 6th dilution, or 6th decimal trituration, for cases of anæmia, palpitation, constipation, and many other marked conditions to which it is homeopathic, including cold in the head. as soon as a cold is taken, a little Nat. Mur. 3 trit. is taken dry, on the tongue, every hour or two, the cold will be checked, and if it is well established it will be cut short in a large number of cases.

When the writer of the article says that the practice of homeopathy "does not consist alone in an obedience to the law of similars," he is right so far; for in practice other things, as he says, have to be considered. But the principle of homeopathy is quite simple, and independent of all other considerations; and it is expressed by the law of similars and nothing else.—Ed. H. W.]

#### THE APPEAL TO THE PEOPLE.

THE correspondence in the English Mechanic, of which we gave an account in our July issue, is still going on. The following letter appeared on June 18th:—

We have now got the admission from Dr. Pope that homosopathists treat their patients homosopathically only when they find that that method suits the case in hand, and he further admits that there are cases in which it is not applicable. Dr. Clarke practically makes the same admission when he says "it does not exclude other means." If this discussion should do nothing more, it will still have done well in having elicited this admission from the editors of two different homosopathic journals.

I have no hesitation in saying that hitherto the general public believed they were treated homoeopathically by homoeopaths: now they will know that they are only treated by this method when it happens to suit the case; when it does not suit, then I suppose they will be treated very much as they would be by ordinary practitioners.

Now that Drs. Pope and Clarke have been so honest as to make the above admission, will they carry it to its logical conclusion, and follow the example of the New York Medical Times by dropping the term "homeopathic" from their journals, and advise that the word be consigned to oblivion altogether? The result of their doing so is predicted in the extract from the Hahnemannian Monthly, quoted in my last; the result of their refusing to do so is also there predicted—viz., annihilation.

"A General Practitioner of Medicine" says, "If the name of homoeopath were to be discarded, the law of similars would still remain." Certainly, with all my heart; it has never been denied. I will say more; if the word be discarded, then I am certain that if there be anything more in homoeopathy than we believe there is, the only obstacle to its full consideration by the medical profession will be removed.

By the way, an expression of mine has had a slightly different meaning put upon it from what I intended. When I say I don't care how a remedy acts, I don't mean that I don't care to know how it acts. I would be very glad to know how every remedy acted, were that possible; but, supposing I did know, I still would not care whether it acted one way or another so long as it produced the desired effect.

M. D.

To which, among others, this reply was sent:—

#### DRUGS AND DOCTORS.

"M.D." endeavours to comfort himself with the notion that he has extracted an "admission" from Dr. Pope and myself to the effect that homeopathy does not exclude the use of other remedial means; but he can scarcely be ignorant that what he terms an "admission" has never been withheld or denied. Homeopathy has only to do with drugs, and so far as I am aware, it has never been claimed that drugs could amputate limbs. Within the

sphere of drug-giving 99 per cent. of the homosopathist's practice is strictly homosopathic; and the exceptional cases no more affect the general character of the practice than the existence of mountains on the earth's surface affect its globular form. According to "M.D.'s" principles, Mr. Herkomer should not allow himself to be called a painter in oils, since he occasionally etches.

But the point of the whole matter is this: Is it, or is it not, true that drugs have the power of causing diseased conditions similar to those they cure? Is it a fact that cinchona bark causes paroxysms of fever and cures ague? that corrosive sublimate causes and cures dysentery? that nux vomica causes and cures a particular kind of dyspepsia? that drosera cures whooping cough and causes a spasmodic cough of a very similar kind? that ipecacuanha cures vomiting just like that which it can We who practise homeopathy excite? and so on, and so on. know that it is a fact—the most useful fact in medicine—and that the fact was demonstrated by the life labours of Hahnemann. And so long as the merits of Hahnemann are unacknowledged, and his memory traduced by puny writers who have never read his books, or, if they have, have not been able to comprehend them, we are in honour bound to defend his memory, and whilst we share the benefits of his labours, to share also his reproach. And we shall never cease to denounce those who, like Ringer, Brunton, and the rest, continue to sit in the seat of the scornful, whilst they help themselves to his works, and have not the courage to acknowledge their debt to the great man whom it is the fashion to revile. I am glad "M.D." cannot find a word to say in defence of their action; but until he joins in denouncing it, he must, in a measure, share their condemnation.

I cannot congratulate "M.D." on his success in endeavouring to extricate himself from his "don't-care" admission. He seems to me to be as deep in the mud as ever. He does not care to know how a medicine acts; to my thinking it is very important that he should.

After the failure of the experiment of dropping the word "homosopathic" to make any alteration in the relations between the two camps—thanks to the spirit of such men as "M.D."—it is not likely that it will be repeated. Besides, it is too late; if "M.D." has insuperable objections to the term, he must now appeal to the dictionary-makers to get the word "annihilated."

In reference to the test-cases offered, and my offer to treat them, I beg to inform you that one of your correspondents has put himself under my care, and his case will be reported on in due course. To your other applicants for treatment, allow me to say that the proper course is to apply to the nearest homeopathic doctor, or to consult the better manuals of homeopathic treatment.

JOHN H. CLARKE, M.D.

15, St. George's Terrace, Gloucester Road, S.W.

Dr. Pope sent the following letter, which admirably explains the muddle into which the Lancet fell respecting the New York Medical Times and the Hahnemannian Monthly:—

"Doctor Medicinee" (June 18th) informs your readers that the "good reason" which "the body of the profession have for considering homosopathy quackery is, that they believe the name is used for an advertisement by men who know that they are healing their patients on ordinary principles of medicine." So far from this being a "good reason" for not putting homeopathy to the test of clinical investigation, it is a mere excuse for not doing so, and, moreover, an entirely unjustifiable excuse. Medical men do not use the word homocopathy as an "advertisement;" did they do so, you would find the word "homoeopathist" emblazoned on door-plates, figuring on visiting-cards, and appearing in the advertising columns of the newspapers! There are not a dozen medical men in the entire country who use this word in either way. The British Homeopathic Society comprises within its membership nearly half of the medical men practising homeopathy in this country, and one of its laws ordains the expulsion of "any person who shall announce by placard on any public place, or shall publish in any advertisement or circular letter his mode of practice or place of abode; or shall sell, or cause to be sold, any secret remedy or nostrum; or shall publish any pamphlet or book in which cases of cure are detailed, and the remedies are concealed." The word "homeopathy" connotes a doctrine, and that doctrine is the most far-reaching and the most widely applicable of all therapeutic doctrines. No other word so concisely and clearly expresses what this doctrine is. To abandon the use of this word would be, as I said in an address I delivered at the British Homocopathic Society four years ago, "to offer an obstruction to therapeutic progress. Lose sight of the word 'homœopathy,' and, ere long, you will lose sight of the doctrine signified by that word. Having lost sight of the doctrine of homoeopathy, what will remain? A large collection of unstrung empirical facts—facts of untold value when interpreted by the light of homeopathic law; but when viewed without that connecting link, incapable of being understood or appreciated, and, save very imperfectly and ever uncertainly, made use of in practice." Medical men practising homocopathy do not style themselves homoeopathists; but those who avow that they believe in, and, to the best of their knowledge and ability, practise homoeopathy, are so styled by others; and, as this designation is regarded as implying a belief in homeopathy, they would, by refusing to accept it when applied to them, be practically denying their faith. As they are not cowards, and

as they have nothing to conceal, they do not so refuse it. In the same address, when referring to journals, hospitals, etc., called "homeopathic," I said that this question of the name assumed another aspect. "The raison d'être of their institution is the public setting-forth, teaching and illustrating homeopathy. But for the obligation imposed upon us to fulfil such purposes as these, they would have no existence. They have been established and are carried on solely because in no medical society, journal, school, hospital, or dispensary connected with general medicine can homeopathy be set forth, taught, or practised at the present time. And, further, they receive the distinctive appellation 'homeopathic' because it is of the first importance that all who are desirous of knowing what homeopathy is should have an opportunity of knowing also where they may learn somewhat of it."

Your correspondent also thinks, or appears to think, that "it pays to call yourself a 'homeopathic' physician." Did it do so, you may rely upon it that hundreds of men would at once adopt the title. But seeing that, without "calling yourself a 'homeopathic' physician," the mere fact of your being known to believe in and to practise homeopathy excludes you from all medical societies (except such as are avowedly homeopathic), denies you access to the columns of the general medical press, and generally debars you from public medical appointments, I fail to see how calling yourself a homeopathic physician can be regarded as paying. The fact is that it is largely because the practice of medicine homeopathically does not pay that the refusal to in-

vestigate it is so general.

"M.D." shows how imperfect his knowledge of the history of homeopathy is when he writes as though he thought that the admission made by myself and Dr. Clarke that there were cases occurring in practice in the treatment of which homeopathy was not applicable, had been made for the first time! Hahnemann refers to such cases in the "Organon of Medicine." Every exponent of homeopathy since his time has noticed them, and Dr. Sharp, in one of the earliest of his invaluable series of "Tracts on Homeopathy," published more than thirty years ago, entitled one "The Limits of Homeopathy." This is simply a specimen of the almost complete ignorance of the subject which prevails among the majority of medical men.

"M.D." says that the law of similars "has never been denied." The Lancet, when commenting upon a well-intentioned attempt of Dr. Wyld to establish a modus vivendi between medical men who practise homeopathy and those who repudiate it, said "nothing less than the most unreserved renunciation of all the dogmas of homeopathy, both in name and in deed, will be accepted" (June 2nd, 1877). Dr. Wilks, as I have already stated, denies that "there is any doctrine in therapeutics." The doc-

trine is denied, and largely so, because "it does not pay" to affirm it. Many, I know, believe in it as fully as I do, but lack the courage to face the boycotting its affirmation would entail. For this reason is it that it is so essential that public opinion should insist on a cessation of boycotting in this direction.

Just one word in conclusion about the paragraph attributed to the Hahnemannian Monthly. It has a most curious and suggestive history. The New York Medical Times, some few years ago, hoped to improve its position by dropping its distinctive appellation, continuing, at the same time, to advocate homosopathy as the chief basis of all drug selection in therapeutics. The paragraph "M.D." quoted from the Lancet as having appeared originally in the "H.M." (with the exception of the first five lines), was copied by the "H. M." from the New York Medical Times. The printers omitted the usual quotation marks, and the following month the New York Medical Times gave their own words as being those of the "H. M." And all this, notwithstanding that they were followed by a page of crushingly sarcastic commentary, and that the very same number, July, 1883, quoted, with the heading "Sound Doctrine," from the Homocopathic Leader, the following passage: -- "We take it there is too universal a belief in the homeopathic law, too general a use of it in the practice of homoeopathic physicians, too sure a knowledge that the only way to propagate a truth distasteful toits opponents is by fighting with a banner, too honest a faith that when homoeopathy has been fully developed and simplified an ordinary man will seldom need to go to any other resource, for us just now to forsake the name which is compelling the world to listen to the truths of scientific therapeutics. Not, we think, till this war is over will the homosopathist be ready to give up that by which he is known, and for which the world respects him."

Tunbridge Wells, June 21.

ALFRED POPE.

When "M.D." returned to the attack the following week it was evident that he had almost had enough of it.

Drs. Pope and Clarke have stated that they intend to retain the name "homeopath." This means that they intend to remain a "sect" distinct from the general body of the medical profession. They have given their reasons for so doing; whether they are satisfactory or not, I will leave to your readers to determine. I would point out, however, that the advice to drop the name did not originate with me, but with a homeopathic journal, and I have no doubt but that it had some grounds for giving the advice.

Dr. Pope twits me with ignorance in supposing that the admission of himself and Dr. Clarke as to the non-applicability of homocopathy to every case was made for the first time. I was perfectly aware that the intelligent homocopathists admitted it, but I am not sure that the general public knew that they did. In a letter in the "E. M."

of June 18, it is claimed that the law of similars is as "universal as gravitation."

As this is likely to be my last letter on this subject, I would say to Dr. Clarke that I do not defend the action of any man who appropriates the discoveries of another without giving due credit to the discoverer. I am not in a position to say how far Drs. Ringer and Brunton sin in this respect, but if it be the case that they have helped themselves so largely to the fruits of the labours of homeopathists as they are accused of doing, I can't see that it would do themselves, or any one else, any harm to acknowledge it.

M. D. 28th June.

On the 9th of July Dr. Pope had this letter giving the statistics of homeopathy and allopathy compared:—

"M. D." argues that because a medical man is called a "homoeopath," therefore he places himself in the position of a sectarian. As I have already shown, a medical man who acknowledges that homeopathy is a doctrine of first-class importance in therapeutics, and puts his conviction into practice by selecting such mediums for his patients as are homeopathic to their condition, is, in ordinary parlance, called a "homœopath" in order to distinguish him from those medical men who repudiate this doctrine. He does not stand aloof from his medical brethren, he does not refuse to discuss this doctrine in medical societies or professional journals; it is those who repudiate the doctrine who keep him at arm's length, who compel him either to keep silence when a sense of duty calls him to speak out, or to resort to special journals or special societies in order to develop a doctrine which a practical experimental study of it has convinced him is of transcendent importance to medicine. It is the boycotters who are the sectarians, not the physicians who practise homosopathy.

This objection to the word "homoeopathy" was first started by Mr. Oliver Pemberton, of Birmingham, some sixteen or seventeen years ago, as an excuse for the boycotting which he advocated. Prior to his speech on that occasion, the objection had not, so far as my knowledge goes, been raised by any one. But does it not seem a very puerile objection to homoeopathy as a therapeutic doctrine that its defendants and exponents are called homoeopaths? Suppose they are, is practical medicine to be remitted in its progress on that account? If this doctrine contains all, or even half, of that which those who have tested it at the bedside aver that it does, is it to be excluded from all discussion because known by a name that ignorance of its nature and value has rendered abhorrent? Are the sick to be denied the advantages secured by putting this doctrine into practice because "the generality of medical men" have agreed together to call it quackery? The only question that medical

men ought to ask themselves is, "What evidence is there that disease can be cured more frequently, more quickly, and more safely by means of homoeopathically selected medicines than without them, or by the measures commonly taught in the schools?" Supposing that evidence to this effect can be adduced, it furnishes a priori grounds for investigating the doctrine itself at the bedside—the only place where it can properly or adequately be inquired into. Nay, more, such an inquiry becomes a duty. Because this doctrine is known by a "hated name" is no excuse for avoiding or declining such an investigation. The only evidence of any value in determining such a preliminary question is derived from the results of the treatment of large bodies of sick men, women, and children by homoeopathy, and comparing these results with those flowing from the treatment of equally large numbers by the methods ordinarily taught in the schools. Individual cases, however striking, necessarily count for very little when used for this purpose.

Here, for example, is one instance. During the year ending March 31st, 1883, the medical officer of the public hospital, the poor-house hospital, and the gaol hospital of Arepahoe County, in the State of Colorado, was an opponent of homoeopathy. During that year there came under his care in these institutions 1,534 cases; of these 79 died. During the following year the medical officer was what in common parlance is called a homoeopath. He had 1,764 cases and 43 deaths. That is to say, he had 180 more sick people under his care and 36 fewer deaths, or but little more than half as many. The cost of each patient treated homoeopathically was at the rate of 9 dols. 66 cents, and of those treated otherwise it was at the rate of 12 dols. 75 cents. These statements were published in America in 1884, and it was perfectly within the power of any one to examine the books coutaining the hospital records, and to refute them if he could. No one has done so. These comparative results, as Dr. Everett, of Denver, says, do not reflect either on the skill or the ability of the allopathic physicians who conducted the medical affairs of the county during 1882-3; but they show, as he contends, "that it does not lie within the allopathic system of medicine to conduct a hospital as economically and with as great a saving to human life as it can be conducted under the homosopathic system."

Then, again, at Ward's Island Hospital, New York, solely under the care of physicians practising homoeopathy, there were, during 1876, 3,077 cases admitted, with a mortality of 6.07 per cent. At Bellevue Hospital, where the medical officers repudiate homoeopathy, there were, during the same year, 5,658 cases, with a mortality of 12.5 per cent.; and at Blackwell's Island Hospital, under similar management, 8,621 cases were admitted, with a mortality of 12.3 per cent. It is interesting also to note

that the cost of alcohol per head in the first hospital was 3 cents and one-sixth, and in the two others 34½ cents; while the expense of drugs was 43½ cents per head in the first, and 1 dol. 46 cents in the last two. One of the most interesting and instructing illustrations of the superior advantages of homocopathy is that furnished by the late M. Liagre, physician to the town hospital at Roubaix, in France. From 1856 to 1862 the patients under his care were treated after the methods usually taught in the schools, and the mortality was at the rate of 19.26 per cent. In 1863 M. Liagre treated all the patients homoeopathically, and the mortality was reduced to 13.70; while during the following year it fell to 12.97. In his report to the administration of the hospital M. Liagre noticed that the greater rapidity with which his patients recovered after he adopted homeopathy enabled him to admit a much larger number of patients into his 40 beds than he had previously been able to do. In 1862 he had only 348 admissions, in 1863 416, and in 1864 479, all the beds being always occupied during each year; showing that not only is mortality diminished through homosopathy, but that equally through it the duration of illness is shortened. Evidence similar to the foregoing abounds. I have collected a portion of it in a little book published by Gould and Son, Moorgate Street, entitled Homeopathy: its Principle, Method, and Future, to which, in order not to intrude too much on your space, I must refer your readers.

The evidence I have given does, I contend, more than suffice to compel all medical men who have the real interests of their patients at heart to ascertain for themselves whether they cannot, by using the same measures, secure a like amount of success.

Dr. Allinson's letter suggests a remark or two. I will confine myself to his remarks about drugs. His first four points here are undoubtedly correct, but his fifth is a direct non-sequitur. Give, in a small dose, a drug which sets up a similar disease condition to that to be cured, and all experience proves that a drug-disease is not produced. Give large quantities of any drug, and, probably enough, an artificial disorder is added to that which has been induced by defiance of the laws of hygiene. Whatever advantage a person suffering from a chronic disease might derive from proceeding on the lines Dr. Allinson propounds, in acute disease total abstinence from suitable drugs given in appropriate doses is a distinct disadvantage. Allinson makes a challenge which I am not in a position either to accept or decline; but the proceedings he endorses were gone through on a large scale many years ago by Dr. Dietl, of Vienna, with reference to pneumonia. He treated 85 cases by blood-letting; of these 17, or 20.4 per cent., died. By large doses of tartar emetic he treated 106, of whom 22, or 20.7, died. Then 189 cases he treated without any drugs at all, and only 14, Digitized by GOOTIC

or 7.4 per cent., died. In the Austrian homeopathic hospitals the mortality from pneumonia at the same time was 5.7 per This does not show any very great difference between non-medicinal and homoeopathically-medicinal treatment, so far as the mortality is concerned. But, computing the duration of the disease from the symptoms of the inflammatory fever to the complete cessation of the stethoscopic signs, what is its length in each class of cases? In those treated with blood-letting it was 35 days; where large doses of tartar emetic were given it was 28.9 days; and where no drugs at all were used, it was 28 The late Dr. Henderson, at that time the Professor of Pathology in the University of Edinburgh, carefully compared these cases of Dietl's with 43 that had come under his care in private practice, and under that of the late M. Tessier, of the Hôpital Beaujou in Paris, who treated his cases homeopathically. The average duration of these was 112 days. Hence, while the mortality in cases treated homosopathically was only 1.5 less than where no drugs were given at all, the illness was 174 days shorter.

Finally, in 1880, Mr. Hughes, the treasurer of the Temperance Hospital, stated that the mortality in that institution was lower than that of any similar institution in the metropolis except the London Homeopathic Hospital. Dr. Edmunds endeavoured to explain this away by the assertion that "as a rule serious cases were not taken into the L. H. H." Dr. Dyce Brown, one of the physicians to the L. H. H., showed in a letter to the Christian World (July 15th, 1880), the paper in which this statement appeared, by an analysis of the reports of the two hospitals, that while out of 135 cases treated at the Temperance Hospital only 73 had any claim to be called "serious," at the L. H. H. during the same year, out of 494 cases, 252 were of a distinctly "serious" character. The mortality at the former was 4½ per cent. during 1880, and at the latter during ten years

had been about 3.2 per cent.

This difference in result, be it remembered, is not in the men, but in the measures. The greater success is not from the use of secret nostrums, but from a method of prescribing medicines within the reach of every medical man in the country. Why is it not more generally sought after?

Tunbridge Wells, July 5th.

ALFRED C. POPE.

# Dr. Clarke replied to "M.D." as follows:—

I am glad that "M.D.," in retiring from this discussion, clears himself from the reproach of endorsing the action of Drs. Ringer and Brunton in their appropriation of homoeopathic remedies without acknowledgment. It is true his condemnation is feeble and conditional; but he does condemn them, for

there can be no doubt of the facts. "M.D." savs he is not "in a position to say how far Drs. Ringer and Brunton sin in this respect;" but surely their books are not so difficult to obtain that "M.D." could not easily put himself in that position—if he wished. Where does "M.D." suppose that Ringer found out the value of cantharis in Bright's disease and cystitis; of calcium sulphide in suppuration; of arnica in carbuncle; of camphor and copper in cholera; of veratrum in diarrhœa; of corrosive sublimate in dysentery; and a hundred other (from "M.D.'s" point of view) paradoxical pieces of practice? Where, if not in the works of Hahnemann and his disciples? If "M.D." can point out any acknowledgment to Hahnemann and the principle of homeopathy in Dr. Ringer's book, I shall be very happy to see it. But "M.D." can hardly be ignorant that the peculiarity of Dr. Ringer's book, and its superiority over other text-books of therapeutics emanating from the old school, consist in the presence of such bits of homeopathy as I have just quoted. And as for Dr. Brunton's book, I may instance for "M.D." the recommendation of ignatia for amenorrhœa, arnica for bruises, apis for sore throat, pulsatilla for dysmenorrhœa, rhus for erysipelas, achillœa for post-partum hæmorrhage, bryonia for toothache, pleurisy, rheumatism, and about forty other diseases—and I could fill columns of your journal with other instances if there were need—as examples of homoeopathic practice to which Dr. Brunton has helped himself, without any acknowledgment of the principle on which the virtues of the remedies were discovered, or of Hahnemann, their discoverer. "M.D." says he does not see that it would do them any harm to acknowledge it. Neither do I; and I would suggest to "M.D." the propriety of his intimating the same to those whom it most concerns.

"M.D.'s" logic is curious. He says that Dr. Pope and myself have stated that we "intend to retain the name 'homeopath,'" and "that this means that they"—Dr. Pope and myself, I presume—"intend to remain a 'sect' distinct from the general body of the medical profession." For my part (and I leave Dr. Pope to answer for himself), I have no desire whatever to "remain a sect," nor do I acknowledge that my belief in homeopathy and my confession of my belief constitute me in any way a sectarian. I have just as much right to believe in homeopathy, and practise it, without being thereby cut off from the general body of the profession, as Sir Joseph Lister has to believe in carbolic acid and practise antiseptic surgery without committing the unpardonable sin of—as "M.D." would put it—becoming "a sect."

This sectarian argument is the last resort of our opponents. The first objection to homosopathy is—not that it is not true or good, but that it is "an exclusive dogma." Then when we

show that it does not exclude other means, the fault is that it ought to be exclusive, and homosopathists are knaves if they ever employ anything else. When these two objections have been allowed to neutralise each other, there remains a third, and that is final. For avowing our belief in what others may believe with impunity so long as they do not avow it, we have been cut off from all professional intercourse with "the general body of practitioners," and now this magnanimous body, or any particular unit thereof, can always turn upon us with the fearful charge of being "a sect." We admit it. In the dictionary sense, we are a sect—a division. But the sectarian spirit—and, as we are simple enough to suppose, the sin—is with those who cut us off.

"M.D." is welcome to this weapon. It cuts his own hands, and does not hurt us. He cannot say that homoeopathy is not true, that it is not good, that it is not an invaluable rule of practice. If it relieves his feelings to call homoeopathists a "sect," I for one do not begrudge him such relief.

JOHN H. CLARKE, M.D.

15, St. George's Terrace, Gloucester Road, S.W.

The following letter from the originator of the discussion, though less controversial than some of the others, is of extreme importance. We venture to give it the heading of

#### THE MORALS OF MEDICAL PRACTICE.

"Truthseeker" is certainly in the right when he so plainly laments the position of medical men; personally, I feel that a man who visits a patient for one day after it is actually necessary is acting dishonestly, and "obtaining money under false pretences." This feeling must cause doctors to very often cease their attendance upon cases at an earlier period than the patient thinks necessary, as the patient is often ignorant of medicine, and it must lead very often to apparent neglect of persons whose troubles are imaginary and need no medical help, and, unfortunately for us doctors, these latter are often the best "paying" patients; speaking from my own mental experience I suppose these things are so with others also.

The doctor, however, must live by his work, and it is discouraging to know that the more rapidly he restores a patient to health, the less will be the remuneration he will receive, and to a weak human creature like myself it is galling to look back on, say, last year's work, and see that without any annoyance to one's patients one could have very much increased one's income

by more visits in many instances.

The cases which give a medical man the greatest satisfaction are undoubtedly those in which the money question does not

enter; such a case is when one has restored to health some person who is too poor to allow of our sending in a bill. It may be presumption on my part as a young man, but to any youths who are contemplating joining the profession, I would say, "Do not do so, unless you are quite sure that money is not your object; or unless you intend to join some public service in which you will be paid a fixed salary, and your success will be estimated upon a more genuine basis than that of mere monetary income."

The measure of every medical man's success should surely be estimated upon the increasing number of his patients, the decreasing length of his attendances upon each case, and the reduction of the ratio of deaths to the number of cases attended; all this has nothing to do with that false appearance of success estimated upon money; the patients may all be poor people, the success is genuine. Our profession, I assert with confidence, when regarded apart from money as its object, is one of the highest missions to which a man can be called in the service of suffering humanity; but under the existing miserable system of remuneration "per visit," all that we possess of charity, self-abnegation, and uncompromising, even super-scrupulous truthfulness, must be constantly exercised to prevent this noble vocation being debased to the grovelling standard of a mere money-getting trade upon the weaknesses and ignorance of our fellow-creatures.

#### A GENERAL PRACTITIONER OF MEDICINE.

The issue following that in which the above letters appeared contains no letter from "M.D." Probably that gentleman finds himself sufficiently answered. We trust that as soon as he has satisfied himself of the extent of the sin of Drs. Brunton and Ringer he will lose no time in representing to these offenders what he thinks of their conduct.

# LEAGUE INTELLIGENCE.

# LORD EBURY PRESIDENT OF THE LEAGUE.

It is with extreme pleasure that we announce the acceptance by the Right Honourable Lord Ebury of the Presidency of the Homocopathic League. Lord Ebury has done for homocopathy more than any other layman, and our movement, which is essentially an appeal to the laity, could not possibly have a more fitting President than the venerable nobleman to whom we owe the "charter of our liberties," the XXIIIrd clause of

the Medical Act. But for the action of Lord Ebury when the Act was passed it would have been possible for medical bodies to reject all candidates for degrees who were suspected of believing in homeopathy. And before the passing of that Act this was done in a number of cases. The League is to be heartily congratulated on its first President, and we trust the event may prove that Lord Ebury has added to his own honours as well as done honour to the League in his acceptance of the office.

# APPOINTMENT OF A SECRETARY.

The Committee of the League have been fortunate in obtaining the services of Mr. E. H. Laurie, of 16, Blandford Square, London, N.W., as Secretary to the League. It is requested that in future all inquiries respecting the League, all applications, for the tracts that are being published, and all subscriptions, should be addressed to Mr. Laurie instead of to the Hon. Sec. Mr. Laurie is a son of the late Dr. Laurie, whose admirable works on domestic medicine are known to homeopathists all over the world, and is himself an enthusiastic adherent of homeopathy, though not a medical man.

#### THE TRACTS.

Four tracts have been issued to members of the League and are now on sale. Others are in the press and will be issued monthly. We have elsewhere given a review of the first four.

## DEPUTATION TO THE BOARD OF MANAGEMENT OF THE L. H. H.

A deputation from the League waited on the Board of the London Homeopathic Hospital on Wednesday, June 30, and presented a memorial, which we have printed elsewhere, and which we have no doubt will interest our readers.

The deputation met with a cordial reception, all the members present expressing their individual approval of the aims and work of the League. But for the present they did not deem it expedient to join the League in their corporate capacity. The deputation having thanked the Board for the courteous reception they had accorded them, withdrew.

# PURCHASERS AND DISTRIBUTORS WANTED.

Now we have a literature we want people to buy it and to distribute it, and so to gain adherents to the League. We can promise those who have not seen it that it is plain, pointed, and solid, though by no means heavy reading, and it is at the

same time cheap. We ask all who have doubts as to the wisdom of our work to expend a few pence in our tracts and see for themselves.

# REVIEWS.

# HOMŒOPATHIC LEAGUE TRACTS.1

THE first four tracts of the Homeopathic League have been published, and are in the hands of the members of the League; and we venture to say that not the most fastidious stickler for professionalism can find any fault with these specimens of the

League's work and aims.

Tract No. 1 is devoted to an explanation of the raison d'être of the League. Its title is in the form of a question, Why should the Friends of Homeopathy form a League? The reasons there set forth at large are briefly these: Homeopathy is not accorded fair play by the majority of the medical profession; it is misrepresented to the people; it is a real reformation of therapeutics, whilst the ordinary allopathic practice is acknowledged to be unscientific. "To ensure fair play for the medical treatment they prefer, it is essential that the friends of homeopathy should form an association, that shall spread abroad a knowledge of the claims of homeopathy to be considered an honest and successful attempt to improve the practice of medicine, and of the unfair and unjust treatment it receives at the hands of the dominant majority in the medical profession."

Tract 2 is entitled, Scope of the Healing Art. It shows the relation of drug-giving, or therapeutics, to the other branches of medical treatment, and the different principles on which drugs may be given: the enantiopathic, where the drug acts in a manner opposite to the action of a disease; allopathic, where the drugaction is different from the disease-action; and homocopathic, where the drug acts on the healthy in a manner similar to the disease it is given to cure. The pre-Hahnemannic homocopathy is dealt with, and also Hahnemann's method of ascertaining the positive powers of drugs—that is their powers of producing certain

definite symptoms in the healthy.

Tract 3 is on The Origin of Homeopathy. It gives first the history of Hahnemann's discovery of homeopathy whilst translating Cullen's Materia Medica; it proves that homeopathy was not a hasty generalisation; it shows how Hahnemann gradually evolved his method of using small doses, and disposes of several of the absurd fallacies that have arisen in connection with the latter. After speaking of the fashions that prevail and decline

<sup>&</sup>lt;sup>1</sup> Homeopathic League Tracts, Nos. 1—4. London: Published for the Homeopathic League by J. Bale and Sons, 87—89, Great Titchfield Street, W

in ordinary practice, the tract goes on: "How different it is with homeopathy! Every medicine as it is proved falls into its proper place in the scientific materia medica, and remains for ever a health-giving remedy for the disease it mirrors in its positive effects. While we see remedies come and remedies go in the old school, the medicinal acquisitions made by homeopathy remain good for all time. The first medicines introduced by Hahnemann to medical practice are as frequently and as successfully used to-day as they were fifty years ago, and will be equally useful fifty or five hundred years hence."

Tract 4. Hahnemann's Achievements in Medicine and the Allied Sciences. This tract disposes in the most complete way possible of the calumnies that have been industriously circulated in reference to Hahnemann's supposed ignorance and base motives.

"We have thus shown that Hahnemann, so far from being ignorant, was a man of exceptional learning, conversant with many languages, dead and living, well read in all medical and classical literature. That he was distinguished above his fellows before he discovered his homeopathic rule for his eminent services to chemistry, pharmacy, hygiene, and medicine."

We think we have shown enough to indicate the extremely interesting nature of these publications, and the desirability of every homosopath having them in his or her possession, as weapons both of aggression and defence. They are written in popular style and are numbered consecutively, so that when a sufficiently large number have been published they may be bound in one volume and indexed. The price is low enough to admit of their being purchased in numbers and sent about by friends of the faith. All who have not joined the League should at any rate purchase the tracts. They are to be obtained from the publishers by non-members and members alike. They are published at one penny each, a dozen for eightpence, and a hundred for four shillings and sixpence.

## MASSACHUSETTS HOMŒOPATHIC MEDICAL SOCIETY.1

MASSACHUSETTS is to be congratulated on possessing a society which can produce such an admirable year's work as is presented to the readers of this volume for 1885. The whole realm of medicine and surgery is here represented, and Materia Medica is well represented by excellent provings of two drugs, Curare and Xanthoxylum Frazineum. Dr. Edward L. Mellus relates a

<sup>&</sup>lt;sup>1</sup> Publications of the Massachusetts Homosopathic Medical Society. 1885. Vol. VIII. Published by the Committee on Publications. Boston: Franklin Press; Rand, Avery, and Co. 1886.

case of organic stricture of the descending colon successfully treated by homocopathic medicines, which should teach us never to despair even in the most unpromising of cases. The patient was under treatment, off and on, from September, 1883. A variety of medicines were given without much effect, and treatment was discontinued. The following year the patient again presented herself. Under anæsthetics a stricture was found in the sigmoid flexure admitting a No. 9 flexible steel catheter, and afterwards a No. 10 rubber bougie. The beginning of the stricture was abrupt, and the opening was surrounded by small knobs or wart-like growths nearly as large as peas. was thickened all round, and felt hard, like scirrhus. At Dr. Nicholls's suggestion (who with Dr. Warren was consulted about the case, and present at the examinaton), Graphitis 30 was given in water every three hours. This was continued with marked benefit for some months. The stools, which had been liquid, became formed, and as large as half an inch in diameter. In November they became smaller again, about the size of a pipe-stem, and extremely scanty. Bryonia was now of great service, but still there was a good deal of pain, when Schüssler's Magnes.-Phos. 3x was given, a powder night and morning. ten days there was no pain left, and at the time of reporting improvement had gone steadily on, the patient being able to help in the work of the house.

Dr. George D. Bliss, of Dorchester, reports a case of psoriasis of a most inveterate and extensive kind, affecting buttocks, back, chest, left loin and groins, in a woman of about fifty years of age. She had had it for twenty years, and had been under treatment with but little relief nearly all the time. irritation was terrible. She came under Dr. Bliss's care on December 18th, 1884. He learned that her mother had had some stomach trouble, which caused her to vomit almost incessantly. Otherwise her relatives were healthy. She was fleshy, but the flesh was flabby. At times she was excessively nervous; her head would shake so that she could not hold it still. Dr. Bliss gave her an ointment of carbolic acid, three drops to an ounce of cosmoline, and Arsen.-Alb. 3x internally. The itching and burning were controlled to a considerable degree. Virosa 3x was next given, and after taking this for a week she felt like a new woman. The nervous symptoms had disappeared, and the eruption was much better. The medicine was continued three times a day for several weeks, and when seen on March 2nd many of the spots had entirely gone, and the rest were fading away. It is worthy of remark that whilst under allopathic treatment, when there was an improvement in the eruption the general health was worse, whilst under homeopathy

both improved together.

#### PURPURA.1

We have spoken at such length on this important work elsewhere that we need say very little regarding it here. Dr. Winterburn, it seems, had the task assigned to him of writing on the subject of Purpura by "Our State Society," and the manner in which it has been performed makes us hope that this sagacious society will soon set him to work again. This is a most valuable contribution to our knowledge both of the disease itself and of its treatment.

#### PASTEUR: HIS METHOD AND ITS RESULTS.2

Twelve deaths having already occurred from hydrophobia after the "infallible" inoculation of M. Pasteur, even the stoutest among the admirers of the vivisecting chemist are beginning to have their doubts. When the lecture before us was delivered by Dr. Kingsford the death-roll was much less grave, but the lecturer subjected M. Pasteur's method to such destructive criticism that all who heard her must have been fully prepared for the disasters that have followed. Indeed, as Dr. Vincent Richards says in his letter to the Lancet of June 26th, "the very essentials of proof on scientific grounds are wanting." But Dr. Kingsford did not confine herself to the scientific grounds. She maintained that the method of Pasteur is morally abominable.

"And for the moral aspect of the system, alas! can anything be more diabolical? A system based on torture of the very worst description, on the very vastest scale that has yet been conceived! Pasteur's method is the Apotheosis of Vivisection; by it all the worst crimes of a bloody and dastardly science are consecrated, perpetuated, and made unassailable. If Pasteur be in the right, if Pasteur's method be legitimate, then the Schiffs, the Goltzes, the Majendies, the Mantegazzas, the Burdon Sandersons, the Ferriers, and the whole tribe of sworn tormentors are for ever out of reach. Pasteur will throw his mantle of protection over all the laboratories of Christendom, and sanctify their worst atrocities."

### NEW THEORY AND OLD PRACTICE.3

In this work Surgeon-General Gordon has brought together in very complete form the evidence both for and against the

<sup>1</sup> Purpura. By George William Winterburn, Ph.D., M.D., Editor of the American Homoopathist. New York: A. L. Chatterton and Co., 1886.

<sup>2</sup> Pasteur: his Method and its Results. A Lecture. By Anna Kingsford, M.D. London: North London Anti-Vivisection Society, 27, Carlingford Road, Hampstead. 1886.

\* New Theory and Old Practice, in relation to Medicine and Certain Industries: being an Analysis of Current Literature of these Subjects. By Surgeon-General C. A. Gordon, M.D., C.B., Hon. Physician to the Queen, etc. London: Williams and Norgate, and Oakley Walbrook. 1886.

alleged value of experiments on living animals. It is a work that must have cost the author an immense amount of labour, and one for which all who are interested in this subject, and need a book of reference, will gladly acknowledge themselves his debtors.

In his Preface Surgeon-General Gordon quotes from Dr. Abercrombie the following weighty words:

"In the sciences which deal with the powers of living bodies there is a great temptation to grasp at premature inductions, and when such have been brought forward with confidence there is often difficulty in exposing their fallacies, for in such a case it may happen that as long a course of observation is required for exposing the false conclusion as for ascertaining the truth."

Dr. Gordon's work is a practical illustration of the truth of this remark. He has examined in the most careful way, and has placed side by side, the arguments for and against the fashionable theories of the present day, and has found as a reward for all his trouble that the arguments against are overwhelmingly stronger than those in favour of them.

We heartily commend this brochure to all who wish to know how matters really stand in relation to the questions dealt with.

# Obituary.

# CHARLES RANSFORD, M.D.

CHARLES RANSFORD, M.D. Edin., F.R.C.P. and L.R.C.P., died at St. Cross Hospital, Winchester, on Sunday, 11th July. aged seventy-eight. He was a native of Bristol, where his medical education was begun, and carried on at London, Paris, and the University of Edinburgh, where he graduated in 1833. After fifteen years' practice he left, and received from the Royal College of Physicians of Edinburgh a testimonial and silver plate for his services as treasurer of the College of Physicians. He was forward in all good works for the benefit of poor and rich, and was universally regretted in Edinburgh. He was in practice at Alnwick to the great satisfaction of Duke of Northumberland and family; and it was there he became a homeopath, as he has fully explained in his pamphlet, "Reasons for embracing Homocopathy," which had a wide circulation, and was translated into several languages. He went to York, where a homocopathic M.D. was wanted, and had a large practice in town and country. Then he went to Sydenham. where his health and strength at last became unfit for practice. and from the expenses of a large family, and three sons educated for church, army, and medical profession, and pecuniary losses, he ended his days peacefully and in the good hope of eternal life, at St. Cross Hospital, Winchester. Digitized by GOOGLC

# GENERAL CORRESPONDENCE.

#### HOMŒOPATHIC LEAGUE.

To the Editor of the Homeopathic World.

SIR,—Permit me to suggest the following as a summary of the objects the members of the League should hold in view. I would also suggest that in a short leader you would recommend all homoeopathic chemists to print these objects on the back of their circulars and handbills, so as to give them the greatest possible circulation.

This League has been lately (May, 1886) founded in London

for the following purposes:-

1. To extend the belief that the homoeopathic rule, Similia similibus curentur (let likes be treated by likes) is at present the best known and only scientific rule whereby medicines can be prescribed to cure disease.

2. To defend homoeopathy from being defamed and vilified by those medical men who have neither investigated its merits nor

seen homeopathic clinical treatment.

3. To make known to the public generally that homosopathic doctors holding licences to practise from allopathic licensing bodies and colleges are systematically boycotted by those allopathic doctors who vilify the homosopathic rule. This boycotting is (1) exclusion from medical societies, (2) exclusion from hospital appointments, (3) exclusion from public appointments of all kinds, (4) exclusion of literary articles and even advertisements from allopathic medical papers and periodicals, (5) exclusion from consultations where human life is in the balance, (6) exclusion of reviews of homosopathic medical books in allopathic papers and periodicals.

4. To expose the present wholesale privateering and poaching of homeopathic medicines by certain medical writers who now wear a mask, and advocate the use of medicines hitherto exclusively used by homeopathic physicians. The discovery of the homeopathic rule being thus designedly and unfairly suppressed by these medical writers in their books and literary

articles.

5. That many allopathic practitioners following these writers are now unwittingly treating their patients homoeopathically, while at the same time they are inconsistently vilifying and

defaming the homeopathic rule.

6. To educate persons unacquainted with the homoeopathic system in the knowledge that it is founded upon reason, science, and experience. That it has been practised since 1810, when Hahnemann discovered the homoeopathic rule, and wrote his Organon. That the literature, even in England, is ex-

tensive, for besides books, the British Journal of Homeopathy (a quarterly) was published from 1843 to 1884; the Homeopathic Review (a monthly), which is still flourishing, from 1857; the Homeopathic World (a monthly), which is also still flourishing, from 1866.

- 7. To publish on the house-tops that many of those dominant practitioners who assume to themselves orthodoxy, finding that patients recover while under homeopathic treatment, have now lost all faith in their own drugs, and have gone from the one extreme of giving poisonous doses to the other extreme of depriving their patients of the proper medicines that would cure them.
- 8. To weld the units of the homosopathic laity into a compact body, whereby they may have adequate force to formulate a demand for a medical charter, with legal power to establish a licensing body, so as to grant licences to suitable persons on examination after the manner of the College of Physicians.
- 9. To make known that the opponents of homeopathy have striven to stamp out this system of medicine, by ridiculing the small dose, which happens to be at variance with old-fashioned That the essence of homeopathy is not the small dose, but the rule by which the medicine suitable for a particular case is chosen—viz., "Let likes be treated by likes."

P.S.—Information respecting the League and League Tracts can be obtained from the secretary, Mr. E. H. Laurie, 16, Blandford Square, London, N.W.

> Yours truly, E. B. IVATTS.

### MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Aitchison (R. S.). Synopsis of Thera-peutics. Arranged for the Use of Pre-scribers, with Posological Table, and an Arrangement of all Poisons. Pp. 120. Pentland (Edinburgh). (Simpkin. 8s.)

Ashurst (J.). International Encyclopedia of Surgery. 6 vols. Vol. vi. Pp. 1,320. (Macmillan. 31s. 6d.)
Aveling (J. H.). On Inversion of the Uterus. With Engravings. Pp. 54. (Churchill. 1s. 6d.)

Braithwaite (Jas.). The Retrospect of Medicine. Vol. zciii. Pp. 424. (Simp-Medicine. kin. 6s. 6d.)

Cornil and Ranvier's Manual of Pathological Histology. 2nd ed., re-edited and enlarged. Vol. ii. Special Pathological Histology: Lessons on the Organs, Part 2. Pp. 470. (Smith and Elder. 16s.)

Corning (J. L.). Brain-Rest: Being a Disquisition on the Curative Properties of Prolonged Sleep. 2nd ed. Pp. 185. (New York). 5s.

Cotterell (E.). The Pocket Gray; or, Anatomist's Vade-Mecum. Compiled expressly for Students. New ed. Pp. 244. (Ballilère. 3s. 6d.) Delafield (F.). Studies in Pathological Anatomy. Part 2. Vol. 2: Chronic Phthisis, Lobar Pneumonia. Plates 18-39. (New York. 15s.) Glibb (W.). Ambulance Lectures: First Aid to the Injured. Pp. 97. (Griffith and Farran. 2s.)

and Farran. 2s.)

Gibbes (Heaneage). Photographic Illustrations of Normal and Morbid Histology and Bacteriology, including Moulds, etc. 25 Subjects. (Churchill. 1s. 6d. each.)

each.)

Hamilton (F. H.). The Principles and
Practice of Surgery. Illust. 3rd ed.
Pp. 1,000. (New York. 28s.)

Owen (I.). Materia Medica: A Manual
for the Use of Students. 2nd ed., revised in accordance with the British
Pharmaconcia of 1885. Pp. 230 Pharmacoposia of 1885. (Churchill. 6s. 6d.) Pp. 230

Power (H.), Field (G. P.), and Bristowe (J. S.). The Management of the Eye, Ear. and Throat. With Illustrations. Pp. 268. (Cassell. 3s. 6d.)
Ridge (J. J.). Diet for the Sick. 3rd ed. Pp. 56. (Churchill. 1s. 6d.)
South (J. F.). Memorials of the Craft of Surgery in England. From Materials compiled by J. F. South. Edited by D'Arcy Power, with Introduction by Sir J. Paget. With Coloured Plates and Engravings. Pp. 439. (Cassell. 21s.)
Southam (F. A.). Regional Surgery, Including Surgical Diagnosis: A Manual for the Use of Students. Part 3. The for the Use of Students. Part 3.

Abdomen and Lower Extremity. Pp. 264. (Churchill. 7s.)

tarr (L.). Diseases of the Digestive Organs in Infancy and Childhood. With Chapters on the Investigation of Dis-ease, and on the General Management of Children. Pp. 384. (Philadelphia. Starr (L.).

Wills (G. S. V.). Elements of Pharmacy.
Designed as a Text Book for Students Preparing for the various Examinations in Pharmacy. 6th ed., in accordance with the British Pharmacopeia, 1885. Pp. 272. (Simpkin. 6s. 6d.)

## SHORT NOTES, ANSWERS TO CORRESPONDENTS, ETC.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester Road, South Kensington, S.W.

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

### CORRESPONDENTS.

Communications received from Dr. Hughes, Brighton: Dr. Herring, London; Mr. G. A. Cross, London; Mr. Ivatts, Dublin; Mr. Meredith, Lydney; Dr. Harmar Smith, Buckhurst Hill: Mr. Samuel Drummond, Bradford; Mr. William Tebb, London; Dr. Pope, Torquay; Miss Ransford, Winchester; Dr. Dudgeon, London.

### BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische Zeitung.—Zoophilist. — Medi-Advance.—Monthly Homonopathic Review. — Revue Homocopathique Belge.—Homöopatische Monatsblätter.-New York Medical Times.-American Homeopathist .-St. Louis Periscope.—Medical Current. — Clinique. — Medi-Visitor.—Chemist Druggist. — The Guide. . Hahnemannian Monthly .-Bibliothèque Homcopathique. -Medical Era.—Medical Annals.—California Homeopath. -The Clinical Review.— $\mathbf{Ho}$ mœopathic Physician.—North American Journal of Homeopathy.—Homosopathic Recorder.—Medical Counselor. — Medical. — St. Louis L'Art Medical Journal.—Medical Investigator. — Albany Medical Annals.—Homcopathic Journal of Obstetrics. - Clinical Review.—Southern Journal of Homeopathy.—The Builder. Advocate.—Prac--Medical tical Christian.—Winterburn's Repertory. Digitized by GOOGLC

PANCE.

### THE

# HOMŒOPATHIC WORLD.

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SEPTEMBER 1, 1886.

## THE CONGRESS AT BÂLE.

THE third quinquennial International Homocopathic Convention has come and gone. In spite of untoward circumstances and evil prognostications, the meeting was successful beyond the hopes of the most sanguine. Whilst there was good reason to anticipate a pleasant gathering, it was scarcely expected that the meetings would be so well attended, and the discussions so solid and businesslike, as they proved to be. For real work, as well as for hearty good fellowship, the Bâle Convention will bear comparison with either of those that went before. Dr. MEYHOFFER was an ideal president. Delegates from Belgium, France, Denmark, Germany, Italy, Switzerland, the United States and Great Britain, selected him by an almost unanimous vote for the post of honour, and had every reason to be glad and proud of their choice. And in the selection of vice-president the Congress was no less happy. Dr. Roth, with his wonderful facility for translating the thoughts of men into languages other than their own, did more than any one else to make the members forget the barriers of nationality and to recognise the bonds of a common humanity and a common purpose in life, which are deeper and more enduring than all the elements of separation. Gatherings of this kind from time to time are of the greatest possible value; and the hearty endorsement given by the Congress to the energetic action of Dr. HUGHES, which had saved their quinquennial sequence, was a more than sufficient

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answer to those who would have let it lapse. The one feeling of those who attended was one of gladness for having come, combined with sorrow for those who had stayed away. Of all the official toasts drunk at the convivial evening meetings, the last was certainly not the least important—"Prosperity to the International Homeopathic Conventions"! The heartiness with which it was drunk was a bright omen for the future, and we, who have attended two of them, heartily re-echo that sentiment here.

## NOTES.

### OUR PRESENT NUMBER.

THINKING we could make no better use of our space, we have devoted almost the whole of our present issue to a report of the recent Congress at Bâle. But so much was done that the record of it would occupy more than the whole of the space at our disposal. We are therefore compelled to hold over until October the report of the proceedings of the sectional meetings, and also the abstracts of papers with the discussions on therapeutic subjects.

## Bâle.

Bâle or, as its citizens prefer to call it, Basel, besides being a large and thriving city, and one of the gates of the country by reason of its central position, is full of historic interest. During the intervals between the meetings the members of the Convention found abundant occupation in exploring its mediæval streets and ancient monuments. The fine eleventh-century cathedral, containing among other monuments one of Erasmus, is most beautifully situated on the left bank of the Rhine. Seen from the cloisters, the green waters of the swiftly flowing river, with the mountains beyond, form a picture that is not easily forgotten. The museum contains many fine pictures by Holbein, including two very remarkable portraits of Erasmus. In addition to Erasmus and Œcolampadius, and other of the reformers in religion, Basel was at one time the home of Paracelsus, who is regarded by some as the precursor of Hahnemann. Digitized by GOOGLE

## THE SCHWEIZERHOF.

In all congresses the happiness of those who take part is in no small degree in the hands of those who cater for their creature comforts; and it is only fair to the courteous proprietor of the Schweizerhof Hotel to say that he spared no pains to make his guests feel quite at home at Basel. Not only did he arrange for the members to dine together, but he gave up to their exclusive use, free of cost, the spacious "Fumoir" of the hotel, which proved admirably suited for the purposes of the meetings.

### NICOTISM.

The paper entitled "Notes on Nicotism, or the Tobacco Habit," by Dr. Clarke, gave rise, as will be seen, to an animated discussion. It was by a strange irony of fate that such a paper should come to be discussed in a "smokeroom;" but whilst in possession of the Congress there was no suspicion of the odour of the weed until the evening period of relaxation, and some might be inclined to say that a smokeroom could not be devoted to a better purpose than that of such a discussion. The paper will, we hope, before long, be published in full in our pages. In the meantime we may call attention to the discussion, which brought out a good deal of valuable evidence as to the effects of nicotism; though there were some enthusiastic lovers of the weed ready to defend its character against all comers.

## A HOPEFUL FRATURE.

A HEALTHY sign for the future of homeopathy is to be seen in the personnel of the Congress. Though it was pleasant to see the veterans so well represented, it was also very refreshing to find a proportionately large number of younger and young men. There is no fear for the progress of homeopathy and the art of healing when young men are pressing into the ranks, and are so filled with enthusiasm that they will make a point of attending such meetings as these, and of taking their due share in the proceedings.

## FLOREAT COLUMBIA.

THE United States made a very creditable figure. President Runnels was a host in himself; but he also headed a large contingent. With the associate members the British

Islands were first in point of numbers; Switzerland and the United States were bracketed next. But it was the American delegates who made with the British the preponderance of English-speaking members and decided the language of the Congress. If all things had gone on smoothly with the arrangements from the first, there is little doubt that many more Americans would have come. Five years hence we of Europe must show our American brethren what we can do in the way of travelling to an International Congress. We cannot begin drilling for our march too-soon!

### ASSOCIATE MEMBERS.

It was a happy thought to open membership to othersthan medical graduates, allowing them to become Associate Members. Nothing could be more fitting than that such an eminent friend of homeopathy as Major Vaughan Morgan should take part in such a Congress; and it is high timethat our pharmacists should have a recognised place at our gatherings. They have relieved us of a large share of our work in the preparation of our materials, and we should know something of their work, the difficulties they have to contend with, and the pains they take to provide us with drugs in which we may put perfect trust. For this reason we were glad of the presence of Mr. John Wyborn, F.C.S., as an Associate Member, and we trust that many more pharmacists may be induced to attend in future.

## THE LEAGUE.

ALL members of the Homgopathic League will rejoice to learn that the Convention gave its hearty and unanimous approval to that organisation. Dr. Runnels promised to do what he could for the movement in America. It is, as he said, for the laity to take it up and work it, since the doctors have as much as they can do with their professional duties, and have little time for missionary endeavours. It is hoped that the movement may become international. The secretary, Mr. E. H. Laurie, 16, Blandford Square, London, N.W., will be happy to supply information to any one at home or abroad who may desire it; or to send specimens of the publications.

### THE TRANSACTIONS.

THE Transactions of the Convention are to be published in a volume, edited by the Permanent Secretary, Dr. Hughes. All who have subscribed to the Convention will receive a copy gratis; and we may intimate that it is not yet too late to send subscriptions. The Assistant-Secretary (Dr. Clarke, 15, St. George's Terrace, Gloucester Road, S.W.) will be happy to receive and acknowledge any subscriptions forwarded to him and to see that the sender receives a copy of the Transactions when published.

## LEAGUE PUBLISHING FUND.

It will be remembered that in our June number we announced the generous offer of Canon Fergie to give £5 to a publishing fund, provided forty-nine others would do the same before the end of the year. We are happy to announce that the fund has been started by a donation of £5 jointly by two ladies, "C. A. K." and "W. L. S.," through Dr. Dyce Brown. The donation is unconditional, and the fund is thus no longer provisional. This is an example to be followed. To Canon Fergie is due the idea and the initiative, but "C. A. K." and "W. L. S." have bettered his example. We cordially recommend others to join in this competition.

## SARATOGA.

THE interesting letter of our New York correspondent gives an account of the recent meeting of the American Institute of Homeopathy at Saratoga. Dr. Clarence Bartlett was kind enough to send us advance proofs of a full report of the proceedings, which were of a most interesting character. We greatly regret that we have no space this month to make copious extracts.

## Another Congress.

A CORRESPONDENT has been kind enough to send us the following striking note:—

## "BRITISH MEDICAL ASSOCIATION.

#### "BRIGHTON MEETING.

"The B. M. A. last met in Brighton in 1857, the late Fewster Robert Horner, M.D. (Senior Physician to the Hull Infirmary), president. Inter alia, the B. M. A. passed a resolution proclaiming homocopathy' to be 'a solemn humbug.'

### " HULL, 1858.

"Fewster Robert Horner, M.D. (Senior Physician, etc., and Perpetual Vice-President of the B. M. A.), announced himself a 'homocopathist,' after having investigated and applied this mode of treatment in a large series of cases!!

"1886.

"Once again the B. M. A. meets in Brighton. But a few months ago the 'Royal College of Physicians of England' issued a supplementary Pharmacopecia, and approvingly adopted about 200 remedies introduced first of all, 'and hitherto employed by, homeopathic practitioners! 'Magna est veritas, prevalebitque.' Will not the present meeting of the B. M. A. cancel the 'solemn humbug' resolution before they separate?"

Alas! the British Medical Association have done nothing so manly and straightforward. It is a much easier matter to convert one of its presidents to homeopathy than to convert the whole Association to right feeling towards Hahnemann and his system.

### THERAPEUTICS AT BRIGHTON.

Dr. Lauder Brunton was hopeful in his address at Brighton. Considering the advance that has been made in experimental pharmacology of late, he says, we may hope in twenty years more to have greatly added to our stock of remedies, and "to so ascertain the condition of our patients that, either by the proper modification of a single remedy, or by proper admixture of remedies"—or by diet—"we may ensure the action we desire." Considering the manner in which Dr. Brunton has "added to the stock of his remedies," we conclude that by the term "experimental pharmacology" he includes cutting extracts from homeopathic manuals, as well as operating on the vagus nerves of cats and dogs and frogs.

## EPILEPSY.

WE publish elsewhere a letter from Dr. Villers, which will explain itself. The letter was not sent for publication, but it makes its appeal better than anything we could say. Dr. Villers is working up the pathology and treatment of epilepsy, and we hope all who can will send him their experience with this intractable malady.

## PASTEUR FATALITIES.

THE number of deaths amongst M. Pasteur's "patients" now amounts to twenty. This is exclusive of one death accredited to a branch establishment in Russia.

# INTERNATIONAL HOMŒOPATHIC CONVENTION, 1886, BÂLE, SWITZERLAND.

### PRELIMINARY MEETING.

Ow Monday, August 2nd, 1886, at the Schweizerhof Hotel, between twenty and thirty members met for the preliminary meeting, at which the election of officers was held, Dr. Hughes, President of the last Convention, occupying the chair. By an almost unanimous vote Dr. Meyhoffer, of Nice, was elected President, and Dr. Roth, of London, was elected Vice-President. Before vacating the chair Dr. Hughes proposed that an Assistant Secretary should be elected to aid the Permanent Secretary, and to undertake the duties of Treasurer, in the unavoidable absence of Dr. Dudgeon. It was proposed by Dr. Léon Simon, file, seconded by Dr. Runnels, and carried, that Dr. John H. Clarke should be elected to this office.

Dr. Hughes then vacated the chair, and handed the President's hammer, first wielded by Dr. Carroll Dunham in Philadelphia in 1876, to Dr. Meyhoffer, who took the President's

chair amid loud cheers.

The President then called on Dr. Hughes to explain why the Congress had been summoned to meet at Bale instead of at Brussels, as decided upon at the Congress of 1881. The reasons have been already explained in this journal, but Dr. Hughes's remarks may be briefly recapitulated. He said that, in accordance with the resolution of the London Congress in 1881, Brussels was chosen subject to the approval of the homoeopathic practitioners in that city. These having been communicated with, Dr. Martiny replied, in their name, accepting the duties of hosts "avec impressement." Everything went on under this understanding until, at the eleventh hour, Dr. Martiny and his committee issued their now famous circular stating that the Convention could not be held at Brussels, since the response to their invitation and request for papers had been so meagre, and proposing that it should be held in Paris in 1889. Dr. Hughes, as Permanent Secretary, immediately took action to carry out the resolution of 1881, and to prevent the quinquennial order of the Congresses being broken. He conferred with his colleagues, and wrote to Dr. Martiny, pointing out that he and his committee had acted ultra vires, and offering to undertake all the responsibilities of the Congress if the Belgians would agree to its being held in Brussels. But this, for some inscrutable reasons, they refused to agree to. No other course, therefore, was open to Dr. Hughes but to choose another meeting-place, and the choice fell on Bâle, Dr. Hughes, as Permanent Secretary appointed by the previous Congress, with a committee of assistance granted him by the British Homosopathic Society, undertaking all the duties of organising the meeting. Dr. Roth then

gave a resumé of this in French, for the benefit of those present who did not understand English. This office of interpreter Dr.

Roth continued to discharge throughout the Convention.

Dr. Runnels, President of the American Institute of Homocopathy (which has just held its annual meeting at Saratoga for the present year), then moved that a hearty vote of thanks should be passed to Dr. Hughes for his persistence in carrying out the resolution of the last Congress, in spite of the very great difficulties arising out of the action of the Belgian committee, and that his action be emphatically ratified by this meeting as having saved the quinquennial succession of these International Conventions from being irretrievably broken. The motion was seconded by Dr. Wilder, and in putting it to the meeting the President spoke warmly in its favour. The motion was carried unanimously, and Dr. Hughes expressed the satisfaction the vote gave.

The Rules of Procedure were then put and carried as

follows:---

## Rules of Procedure.

1. This Convention shall be constituted of medical men duly qualified to practise in their respective countries; and of pharmacists and other friends of homocopathy as Associate Members.

Its officers shall be a President, a Vice-President, and an Assistant Secretary,—the latter to give aid to the Permanent

Secretary, and to discharge the functions of Treasurer.

3. The general meetings shall be held on Tuesday, August Srd, and on Wednesday, August 4th, from 9.30 a.m. to (if necessary) 1 p.m. On Thursday, August 5th, a similar meeting shall be held in the forencon, and an additional one from 3 to 5 in the afternoon, the first business of the latter being the determination of the place of the next meeting, the election of the Permanent Secretary, and other matters relating to the Convention.

4. That sectional meetings, on Hygiene and on Pharmacy respectively, be held in the Hall of the meeting on Tuesday and Wednesday afternoons, from 3 to 5 o'clock, each meeting to elect

its own chairman.

5. That the official language of the Congress shall, owing to the preponderance of English-speaking members present, be English; but that any member shall be at liberty to speak in his own language provided he secure (preferably in the chairman) an interpreter. The chairman may also, if he sees well, convey the substance of anything said in English, in French or other language.

6. That the subject of the first day's general meeting shall be "General Considerations bearing on Homosopathy;" of the second day's, "Materia Medica;" of the third day's, "Thera-

peutics."

7. That no paper shall be read at the meetings; but the discussion shall be based on the précis in the hands of the members (who can also see any particular manuscript on application to the Permanent Secretary).

8. Before each discussion the President shall indicate the précis on which it is based, and give (or cause to be given) the substance of these in any other language which may seem

required.

9. Speakers in the discussions shall be limited (except by special vote of the meeting) to ten minutes each; save that the

opener of each discussion shall have fifteen minutes.

10. When the President shall see that the time available for any discussion is running short, he shall close the same by calling on the writers of the memoirs discussed (unless they have already spoken) to address the meeting in reply.

Dr. Runnels asked if these rules would apply to the sectional

meetings, and it was ruled that this would not be the case.

The proceedings of the preliminary meeting then terminated.

The following is a list of the members present in the order of their signing the book:—

O. S. Runnels, M.D., Indianapolis, U.S.A.

2. Theophilus Bruckner, M.D., Basle, Switzerland.

3. Richard Hughes, M.D., Brighton, England.

4. J. Meyhoffer, M.D., Nice, France.

- 5. Alfred C. Pope, M.D., Tunbridge Wells, England.
- 6. Walter Wesselhoeft, M.D., Cambridge, U.S.A. 7. Robert T. Cooper, M.D., London, England.

8. Vincent Léon Simon, M.D., Paris, France.

9. Anathole Lambreghts, file, M.D., Antwerp, Belgium. 10. Louis de V. Wilder, M.D., New York, U.S.A.

11. R. B. Rush, M.D., Salem, O., U.S.A.

- 12. M. Mattes, M.D., Ravensburg, Wurtemberg. 13. Oscar Hansen, M.D., Copenhagen, Denmark.
- John H. Clarke, M.D., London, England.
   J. Black Noble, M.B., London, England.

16. M. Roth, M.D., London, England.

17. Guiseppe Bonino, M.D., Turin, Italy.

- 18. J. Boniface Schmitz, M.D., Antwerp, Belgium. 19. Reuben Ludlam, junior, M.D., Chicago, U.S.A.
- 20. Charles Heermann de Hundersmack, M.D., Paris, France.

21. Eberard Focke, M.D., Freiburg, Baden.

22. Frederick Neild, M.D., Tunbridge Wells, England.

23. A. Midgley Cash, M.D., Torquay, England. 24. — Meschlin, M.D., Basle, Switzerland.

25. Oscar Leseure, M.D., Detroit, Mich., U.S.A.

26. H. M. Hobart, M.D., Chicago, U.S.A.

27. Nathan Emmanuel Mossa, M.D., Strasburg, Germany.

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- 28. Robert Anken, M.D., Bern, Switzerland.
- 29. Ed. Syd. Fries, M.D., Zurich, Switzerland.
- 30. V. Z. Heermann, fils, M.D., Paris, France.
- 31. George Scriven, M.D., Dublin, Ireland.
- 32. A. Pfander, M.D., Thun, Switzerland. 33. S. Schädler, M.D., Bern, Switzerland.
- 34. W. Y. Cowl, M.D., New York City, U.S.A.
- 35. Baron Ferdinand von Heyer, M.D., Bern, Switzerland.
- 36. Emile Batault, M.D., Geneva, Switzerland.
- 37. Mdme. Batault, M.D., Geneva, Switzerland.
- 38. W. M. Foster, M.D., Kansas City, U.S.A.

### Associate Members.

39. John M. Wyborn, F.C.S., London, England.

40. Wm. Vaughan Morgan, Major, London, England.

# FIRST DAY.—Tuesday, August 3. Position of Homosopathy.

The President having opened the meeting, Dr. Clarke proposed the names of two gentlemen as honorary vice-presidents. He said he felt that gentlemen would agree with him that it would be a graceful thing to follow the example of previous conventions in this matter. At the first congress in Philadelphia Drs. Hering, Gray, Clotar Müller, and Hughes were chosen; and at the second congress in London, 1881, Drs. Meyhoffer, Talbot, Breyfogle (President of the American Institute for the year) and Drysdale. Dr. Clarke proposed that Dr. Schäder, of Bern (President of the Swiss Homeopathic Convention), and Dr. Runnels (President of the American Institute of Homeopathy for 1886), should be elected honorary vice-presidents on the present occasion. These gentlemen were elected by acclamation.

The President then delivered his address. He said:

Gentlemen,—It is a tradition that the President of the International Homoeopathic Convention should address the meeting at the opening of the proceedings. This duty devolves on me at this Third Quinquennial Convention. I much regret that the honour of presiding over this meeting has not been bestowed upon one much worthier and more able for the office than myself. (No.) However, I trust to your forbearance, and the shortness of the time granted, for the many unavoidable shortcomings inherent in my taking so unexpectedly the chair. What I now wish to bring before you, gentlemen, on this occasion, is the "Present Aspect of Homoeopathy." In reading last night, or, more correctly, early this morning, the précis of papers presented for discussion at this Convention, I was struck in its historical part by the underlying, not expressed lament, notwithstanding that the authors endeavoured to show the best side.

The only very gratifying report comes from over the Atlantic. How is it that in Europe the only true principle and guide in medical therapeutics, the revelation and practical application of which we owe to Hahnemann's genius, and which has already rendered in its secular existence such immense services to suffering humanity, has not made more progress? Dudgeon, in his article "En Avant!" in the same paper, mentions several causes, but I miss one important one. It is that we, Hahnemann's disciples, do not fully agree on the interpretation of the similia similibus curentur. The immediate followers of Hahnemann and those who still adhere to the literal interpretation of his teaching, devote their whole attention to the subjective symptoms and neglect more or less the pathological condition of The more modern conception of Hahnemann's the organs. principle requests not only an external and subjective similitude between the drug action and morbid condition, but it requires, as much as possible, a perfect similitude between the pathological condition and the pathogenetic condition of the medical agent. Hence frequently a want of understanding, a want of unity of action among the members of our body which must necessarily injure our good cause in the eyes of the public. Both these interpretations of Hahnemann's principle are true, but both also are very liable, if exclusively practised, to lead to The purely symptomatic treatment, by neglecting the pathological condition of the organs, will often miss to exhibit the truly homoeopathic remedy, whereas the physic-pathologist will not seldom commit the same fault by not taking into account valuable concomitant and contingent symptoms. There cannot be two homeopathic principles; there is only one. But these two interpretations of the application of the similia must merge into one in order to be complete; i.e., the totality of the symptoms, objective and subjective, must be a guide to the selection of the remedy. There is unity in the disease, there must also be unity in the similitude of the therapeutic action. Consider, gentlemen, that we are the representatives of the only true scientific principle, the principle which crowns the whole system of medical science, that is the sure guide for the cure of disease. I know well that these things have often and much better been told. But it seems to me that they cannot often enough be brought forward. Let us not forget that "union is force," and that only by our unity we can promote the progress of our cause, and reduce in greater measure the common enemy of humanity, How is this goal to be attained? First of all, by the homoeopathic press, and I need not say how much we are indebted in this respect to Dr. R. Hughes. Secondly, to our individual and collective influence in the profession. I have now to apologise, gentlemen, for the informality and shortness of this address. Nobody knows better than Dr. Hughes how

little prepared I was to assume the honour of the President's chair. (Loud cheers.)

On concluding his address the President quitted the chair, and

the Vice-President, Dr. Roth, took his place.

Dr. Roth introduced the subject of the Histories of Hemacopathy. He commented severely on the conduct of Dr. Lorbacher, editor of the Allgemeine Homoopathische Zeitung, in refusing to insert Dr. Hughes's circular and Dr. Dudgeon's letter in reference to a letter by Dr. Weber.

The following is the précis of the History of Homocopathy

during the past five years in the

## Austrian and German Empires.

By Th. KAFKA, M.D., Karlsbad.

I. On 23rd April, 1882, Dr. George Schmid died. He was the author of several good medical works—s.g., Cholora Poison; Has Homeopathy a Right to State Aid? My Medical Testament. He left by will a sum of money for the purpose of endowing a chair of homeopathy in the University of Vienna; but the authorities have not yet done nor are they likely to do anything so sensible.

In 1884 Dr. Veith, Professor in the Veterinary College of Vienna, died at an advanced age. He was a zealous homosopath.

In 1885 Dr. David Seegen died. He was one of the most successful homoeopathic physicians of Prague, and he left a sum of money for the purpose of establishing a Children's Hospital at Prague.

In 1885 Dr. Franz Weinke died. He was a zealous contributor to the Oester. Zeitsch. des Ver. der Hom. Aerate Oes-

terreichs.

Dr. Würstel and Dr. Gerstel (of Vienna) and Dr. Jacob Kafka (of Prague) celebrated the fiftieth year (jubilee) of their

medical degree.

Professor Bakody, of Pesth, published a work called *Hahne-mann Redivious*, in which the scientific character of Hahnemann's doctrines was earnestly and successfully defended. He also published a reply to the attack on homoeopathy of Prof. Jürgensen, of Tübingen.

II. The violent attacks on homocopathy of Jürgensen, Liebreich, and Koeppe were well answered by Sorge (of Berlin),

Mayntier (of Zell), and Heinegke (of Leipzig).

Homosepathy has made great progress among the public of Germany. There is hardly a town in Germany where the allopathic druggists do not also keep a store of homosepathic medicines.

Funds have been collected in Berlin and Leipzig for the

establishment of homosopathic hospitals, and it is hoped that

they will soon be erected.

In 1884 the Berlin Homosopathic Society began the publication of a periodical, which is now regularly published and well

supported by the chief homeopathic physicians.

The Pionier is a society established by Dr. Oidtmann for spreading a knowledge of homoeopathy among the people. It publishes a monthly periodical with the title of Der Pionier, edited by Dr. von Eye, a very useful organ for the propagation of homoeopathy.

The chief original works that have appeared during this period are, besides the polemical ones mentioned above, the Experiences of an old Physician, by Dr. Groos, and the Origin of

and Opposition to Homocopathy, by the late Dr. Ameke.

Burnett's work on Cataract, translated by Goullon, and Johnson's Domestic Physician, translated by Katz, are the principal translated works that have been published.

The Central Verein and the Berlin Homoeopathic Society are

in full maturity.

In Munich the Homoeopathic Hospital was closed after the death of Dr. Buchner, but thanks to the assistance of Prince Dettingen-Wallerstein it has again been opened; it is under the direction of Drs. Quaglio and Koeck. There is also in Munich a society for aiding poor medical students who are anxious to study homoeopathy.

A similar foundation exists in connection with the Central Verein for assisting students and practitioners to study homeopathy in Buda-Pesth under Professor Bakody. They bind themselves in return to settle to practise in some German town.

In Berlin there is an examining board for practitioners who wish to dispense their own medicines in Prussia. Dr. Fischer,

of Berlin, is the examiner in homoeopathy of this board.

Death has removed a very well-known German homosopath, to wit, Dr. Bähr, physician to the late King of Hanover, the author of the well-known prize essay on digitalis; Dr. Rückert, of Herrnhut, one of Hahnemann's original disciples, author of many homosopathic works, the best known of which is his Klinische Erfahrungen; Dr. Borchers, of Bremen; Dr. Ameke, of Berlin; Dr. Rentsch, of Wismar.

In Stuttgart there is a society, the *Hahnenannia*, which assists poor students at the University of Tübingen. A deaconesses' hospital in Stuttgart has for many years been under the care of

a homoopathic physician, Dr. Sick.

Dr. Rapp, who was forced to resign his professorship of Pathology and Medicine in the University of Tübingen on account of his homeopathic proclivities, now enjoys a large-practice as a homeopathic physician, and for some years has filled the post of physician to the Queen of Wurtemberg.

After referring to the above, Dr. Roth called on Dr. MATTES to give a few extra particulars respecting homocopathy in Germany.

Dr. Roth then translated Dr. Mattes' remarks (which were made in German) into English. Dr. Mattes said that 10 per cent. of all medical men in North Germany are homocopathists. They are obliged to undergo a special examination to enable them to dispense their own medicines. Homeopathy is in favour with the government and the wealthy. Prince Bismarck has been under homeopathic treatment, but his doctor was so strict that he gave him up. There is an association started in Germany, of which Prince Salm Horst is president, for the propagation of a knowledge of homocopathy among the laity. Dr. Sick had done much for homocopathy, also Professor Dr. Schmitz They have the inspection of homocopathic at Wurtemberg. chemists. The beloved Queen Olga is a homocopathist, and Dr. Rapp is her body physician. She gives legacies every year to the Hahnemannia, a society which assists students who are in favour of homeopathy.

Dr. HEERMANN, of Paris, said, if it was allowed to add a word, there are some populations in Germany, as at Kiel, who offer houses and money to homeopathic practitioners to come and settle among them. There are some towns where the inhabit-

ants have declared war against old-school practitioners.

### BELGIUM.

By Dr. Lambreghts, fils, Antwerp.

Belgium is reported as enjoying during the past five years a period of calm in respect of attacks on homosopathy and its practitioners, of which the earlier history of our system there is so The only public events in connection with it are a discussion at the Academy of Medicine of a paper on the subject (1881), and (1886) an attempt to obtain wards in the Brussels hospitals where our practice can be carried out. The former turned on the question whether the paper (whose conclusions were, on the whole, hostile to Hahnemann) should be printed in the archives of the Academy, and the proposal was rejected by two votes The latter is yet pending, but has fair prospects of In Belgium, as elsewhere in Europe, homeopathy continues to gain favour among the laity, but the number of its practi-Dr. Lambreghts, indeed, tioners does not greatly increase. estimates it at 70, while Dr. Martiny, in 1881, gave it as 50, but he seems to have no definite evidence such as a directory would afford. The Société Belge des Médécins Homocopathes, and its organ, L'Homeopathie Militante, so valorously conducted by Dr. Gailliard, have ceased to exist; but the older society, the Cercle Homeopathique de Flandres, and the Association Centrale des Homeopathes Belges continue to flourish, as also does the Revue Homeopathique Belge, now-as before-under the able Digitized by GOO

editorship of Dr. Martiny. He has lost a valuable collaboratour in Dr. H. Bernard, of Mons. It is noted with regret that several dispensaries have ceased to exist during the last few years; but those at Brussels, Antwerp, Ghent and other places continue in full operation.

Dr. Roth, after referring to the above, called on Dr. Boniface Schmitz to add a few remarks on Homosopathy in Belgium.

He said he wished to show the real causes of the failure to hold the Congress at Brussels. He made a confession that it was the fault of the Belgian leaders, who were divided among themselves, and had done nothing for years to organise and unite their forces. He believed, however, that the Congress, if it had been held at Brussels, would have done nothing but good to the cause of homeopathy in that city. He expressed his admiration of Dr. Hughes's resolve to hold the Convention at any He divided his further remarks into two parts, what homeopathists have in Belgium, and what they have not. They have general progress amongst laity and professional classes; among the upper classes it spreads largely, but there are great hindrances to its spreading among the poor. They have three Societies: Cercle Homoeopathique de Flandres, Association Centrale des Homocopathes Belges, Société de Médécine Homeopathique. The Central Society, of which Dr. Martiny is president, is only central as having its location in Brussels. The third-named has Dr. Gailliard for its president. Each Society has a journal of its own. In Belgium, homocopathists have not the power to enter the hospitals. Dr. Martiny is endeavouring to obtain entrance to allopathic hospitals, to have a ward placed under homocopathic management. Dr. Schmitz was of opinion that great progress could be made if the three societies would unite. He saw no reason why this should not be, and would endeavour to bring it about.

### BRITISH EMPIRE.

## By John H. Clarke, M.D., London.

Dr. Clarke's history of homeopathy in the British Empire takes the form of a diary (or rather annuary), noting the leading events in each year connected with it. The establishment of the yearly Hahnemann Oration; the founding (thanks to the munificence of Mr. Henry Tate) of a homeopathic hospital in Liverpool; the extension of the work of the hospital in London; and the inception of a revised Materia Medica under the auspices of the National Societies of England and America—these are its encouraging features. On the other side stand the suspension of activity on the part of the School for lack of students; the discontinuance of the British Journal of Homeopathy; and the diminution rather than increase in the list of names contained in the Directory. The sense of need of some further effort to make

known the advantages of our method, and to dispel the ignorance and prejudice which obstruct its advance among the profession, has led to the formation of a "Homeopathic League," which may, it is hoped, do good work. Dr. Clarke notices some evidences of greater liberality towards homeopathic practitioners on the part of the men of the old school, and mentions Dr. Lauder Brunton's *Pharmacology* as another instance of wholesale, but unacknowledged, borrowing from homeopathic sources. A full obituary for each year is given, the death-roll including the names of Leadam, Bayes, Black, Hilbers, Madden, Chepmell, Holland, and Neville Wood.

The Australian Colonies are stated to show steady progress, and in Melbourne, Victoria, a handsome hospital has been built and opened. There has been no time to obtain direct reports from this quarter, but Canada and India will speak for them-

selves.

Dr. Roth remarked that great progress was being made in the Australian Colonies. Dr. Nichol sent a report from Canada, and there is one expected from Dr. Majumdar, of India.

At the request of the chairman Dr. Hughes then read the following letter from Dr. Nichol in reference to the small-pox

epidemic:—

"Dear Dr.,—I had your letter one hour ago, and behold the reply! I trust I am in time. I was too busy to keep figures, but out of a large number of cases I lost but one babe, unvaccinated, French Canadian, of course. I lost no unvaccinated adults, and my colleagues all had a like success. We had another large epidemic lasting from 1874 to 1881 (annual mortality 600 to 900!) and I was busy then, but I lost only one adult, unvaccinated, suffering from constitutional syphilis of a severe type. Few die under pure homeopathic treatment, but it must be pure. I pay close, very close, attention to the therapeutics, and never alternate, never allopathise. My colleagues are like-minded. The allopathic statistics are shrouded in Egyptian darkness. "Yours, in great haste,

"THOMAS NICHOL, M.D., LL.D., B.C.L.

"140, Mansfield St., Montreal, July 20, 1886."

Dr. Pore being called upon by the President said: Mr. President and Gentlemen, in responding to the request to address the Convention on the position of homosopathy in England, it is impossible to ignore the fact that among some of our senior physicians, those who have during many long years borne the burden and heat of the fight in defending homosopathy from attack, who have done more than any for its development, show a tendency to take a somewhat pessimistic view of the situation, to be despondent as to the future of homosopathy in England. However natural this may

be after so long a period of struggling, I do not think that it can be justified when the facts of our position are fairly regarded. I trace this despondent feeling to two causes. It is due, I think, to weariness in the first place. These gentlemen have, whenever a discussion or dispute has arisen, been called upon time after time to reply to the same objections. Over and over again have the same arguments been brought to bear upon them, the same facts adduced to controvert them. These arguments are not replied to, these facts not disputed, but the objections they refuted are nevertheless again and again repeated. This it must be confessed is weary work. The hope inspired by the consciousness of the validity of these arguments and the character of these facts has been deferred, and the old time result has followed, the heart has become sick and the mind weary. Disappointment at the continued ostracism of physicians practising homeopathy has been enhanced by witnessing the professional advancement of men who, while denying the truth of homocopathy, are entirely indebted to the facts they have derived from the study of homosopathy for the position they have acquired. It is the triumph of dishonesty, and the ostracism of an open avowal of the truth, which have largely contributed to this weariness. Then, secondly, the very depth of conviction of the immense importance of homeopathy to the profession and to the sick has tended to develop this despondency when this is compared with the slow advance it has made in professional esteem. It is depressing to see and to hear of disease being protracted which the adoption of homocopathy would have shortened—of fatal results occurring, which we have every reason. to believe that the adoption of homocopathy would have averted. While, however, there is much to dishearten, when we look at the position as a whole there is, at the same time, a great deal. to encourage. First of all look at the position of the great body of the profession. Roughly it may be divided into two classes men who are especially anxious to make money, and those who are desirous above all things to acquire an influential position in. it: and the latter are dependent for their claim of advancement upon the former. Now, as a source of wealth homeopathy is. practically of no account: acute disease is so rapidly controlled through it, that as compared with the effects of traditional. medicine an attendance is of small value. Dr. Pope here referred to a case of simple tonsillitis within his knowledge, where the patient had been confined to bed for three weeks, and was in very feeble health for as much longer; adding that he ventured to say that so prolonged a case of simple tonsillitis was not within the experience of any homocopathic physician present. How great must be the difference between the pecuniary results of an attendance of six weeks and one of ten days he left them to estimate. The advancement of the hospital physician is depen-

dent on his consultations, and these are in the hands of the general practitioners, who are hungering and thirsting after fees; consequently they are tongue-tied, and their efforts to promote the development of the apeutics are secret. Hahnemann is ignored and homeopathy denied; albeit the work done by them is derived entirely from homeopathy. Hence it is that the conspiracy of silence has been successful in keeping homeopathy back. Hence it is that the degree of progress is no greater than it is.

Nevertheless there is much to encourage us to persevere in propagating a knowledge of homeopathy, and also its practical development. The number of avowed practitioners is, it is within my personal knowledge, on the increase. This increase during the last two or three years may indeed be said to be considerable. Further, the extension of the appreciation of the therapeutic principle contended for is seen in the largely increasing number of the secret adaptations of the results of homeopathic experience. In the last work, Dr. Lauder Brunton's, these amount to about 60 per cent. of all therapeutic hints given. In short, there has lived during this century no man, the influence of whose work on therapeutics has been so great as that of Hahnemann has been. Our opponents may sneer at homeopathy as much as they choose, they may ridicule the small dose which alone is necessary to carry out homoeopathic practice to their hearts' content, and they may declaim against homosopathy until their vocal cords snap with tension; but they cannot deny that, in therapeutics, the crowning point of medicine, homosopathy is now being more practised throughout the profession than it ever was, they cannot deny that homeopathy is the point d'appui of therapeutic reform. This, gentlemen, is the work of Hahnemann and of his followers, and no one has done a larger share of this work in our day, or more important work in any day, than the President of the 1881 Convention and the Permanent Secretary of our body-Dr. Hughes. (Loud cheers.) Think for a moment of the time, now sixteen or seventeen years ago, when Dr. Ringer's Handbook of Therapeutics appeared, of our surprise when we found that some 16 or 20 per cent. of his therapeutic hints were derived from homeopathy; and now turn to Brunton's with its 60 or 70! Here, gentlemen, is progress—real, active, useful progress! Here is a preparation of the ground for the general adoption of homosopathy. What, then, do we need for its full cultivation? We need a purer desire on the part of the bulk of the profession to do the best they can for their patients irrespectively of all financial results. We need a greater amount of knowledge of what homoeopathy means, and of how it is to be practised. The avenues for this purpose are two-the professional journals, which are hermetically sealed to us, and the higher class of literary periodicals. These are in some instances

open: wherever they are so we should, as Hahnemann did. avail ourselves of them to make known the truth of which we are the trustees. We have lately in England obtained an opportunity for doing some little work of this kind in a journal of considerable circulation—the English Mechanic—in which Dr. Clarks and myself have done what we could to hold up the standard of homopopathy. We need also increased care in practice, and this means increased study of the Materia Medica, increased care in individualisation of our cases. There is no use in declaring aloud that homosopathy is true, if at the same time the practitioner, by neglecting the study of his Materia Medica, feels compelled in order to find relief to his patients to hark back on palliation. Care in prescribing is essential to success, and success in treatment is essential to the progress we desire. Very well, then, gentlemen, I maintain that we have no cause to despond. If we do but persevere in faithfully presenting homosopathy in the sick chamber, if we persevere in making it known through every available avenue, we must triumph. Homosopathy is true, and truth will not for ever be denied her rightful place. The time will come, must come, when homocopathy will be recognised as the basis of therapeutics throughout the profession. Be it ours to hasten this time! (Cheers.)

### FRANCE.

### By Dr. V. Lieon Simon.

Dr. Liton Simon reports that the number of our adherents slowly increases. At Paris it remains about the same, but in the south there is a sensible increase, thanks mainly to Dr. Chargé. Dr. Jousset has made several proselytes in Brittany. There are about seventy homosopathists in Paris, and 130 in the rest of France. Homosopathy is also not unknown in the French Colonies; there are practitioners of it in Algiers, Tunis, and Martinique. The number of students promises well for the future.

There are in France at least fifteen special homosopathic pharmacies: nine in Paris, two at Lyons, two at Bordeaux, one at Marseilles, and one at Nice. There are two societies, to one or other of which most of the French practitioners belong—the Société Hahnemannienne and the Société Homosopathique de France. Both meet at Paris.

Dr. Léon Simon enumerates our colleagues who have passed away during the last five years, among them being Dr. David Both, the Comte de Bonneval, and Dr. Espanet.

Homocopathy is taught by lectures, hospitals, clinics, dis-

pensaries, and journals.

Lectures have made but little progress during the last five years. The hospitals show the most satisfactory results. There

are two at Paris and one at Lyons, all prospering greatly. The Hôpital St. Jacques has had a new and handsome building erected for it, and contains sixty beds. Next in importance to the hospitals is the Dispensaire Alix-Love. This institution has only been open five months, but is making rapid progress in its numerous branches of work. The dispensaries are numerous and prospering. The three established journals still flourish. Two of our colleagues have joined the staff of the Petite Revue du Midi as scientific contributors, and have pub-

lished several articles of great value to the cause.

Dr. Léon Simon notices the epidemic of typhoid fever in Paris in 1883, and the small mortality in our hospitals and among our private patients. Dr. Crétin's remarkable pamphlet, entitled, Fièvre Typhoide: Hypothèses et Contradictions Académiques, is mentioned with high approval. He also reports fully on the epidemic of cholera in the south of France in 1884 and 1885, where our mortality was only 9.5 per cent. also notes with satisfaction the growth of friendly relations between the old and the new schools, consultations beingreadily obtained in France. He appends a list of books published since 1881, in addition to those mentioned in his full report.

Dr. HEERMANN, of Paris, said he belonged to the school of Hering. Popularly among high and low, rich and poor, thereis in France a desire to have homocopaths amongst them; and this shows a great independence of character in the French, because there was much to dissuade them from it. Again, thereare two societies in Paris, one following Hahnemann, and one in which the teacher speaks lightly of Hahnemann, and goes in for hypodermic injections and scorns individualisation of remedies. This does great harm to homeopathy. Summing up, he said there were a few accessions of young men, but quite

out of proportion to the demand.

### DENMARK.

## By Dr. OSCAR HANSEN.

Dr. Oscar Hansen, of Copenhagen, said that in 1821 homeopathy was first known in Denmark. In 1836 there were three practitioners. In 1853 the cholera epidemic visited Denmark, and the allopaths lost seventy per cent. whilst the homogopaths only lost eight to ten per cent. This had a very marked effect on the public. In 1885 the homosopaths obtained the right to dispense their own medicines. There is a popular homocopathic society; and since 1880 a medical homocopathic society. Several eminent surgeons and accoucheurs are favourable to homosopathy. In the press, a journal which once attacked

homeopathy, in consequence of cholers experience in Marseilles afterwards spoke in its favour.

### ITALY.

Dr. Bonno, of Turin, said that in Italy the resurrection of the nation marked the resurrection of homosopathy. Five years ago the Homosopathic Institute was founded, and by the help of Dr. Leoncini, of the Marine, had obtained a Government charter. Dr. Leoncini has also given 40,000 lira for the founding of a Homosopathic Hospital at Genoa. In the Institute there are, besides medical men, chemists and veterinarians. There is also the Hahnemann Federation. There are fiftye practitioners. There is one journal, Revista Homosopathica, published for thirty years; and there is also a journal of the Federative Society. There is no animosity between allopaths and homosopaths in Italy. Homosopathy is in favour with the poor as well as with the rich. Dr. Bonino hopes himself to have a hospital in Turin.

The reports from Russia, Switzerland, the United States of America, and Spain were then referred to, special attention being drawn to Dr. Bojanus's hint that homoeopathic hospitals do best when there is no university.

### RUSSIA.

## By Dr. Bojanus, Petersbourg.

Dr. Bojanus is unable to give any statistical data about the progress of homoeopathy in Russia, not having received any notice to prepare a paper until too late for the Convention. He gives, however, a very detailed account of an attempt made by Dr. v. Dittman, of Petersbourg, to show the superiority of the homocopathic treatment in diphtheria, which was at that time raging in Petersbourg. Dr. D. first recommended mercurius cyanatus (30th dilut.) as an infallible remedy and prophylactic against this terrible disease; and afterwards he entreated the Emperor to let him have a hospital, in which he could treat the cases of diphtheria entrusted to his care according to the homoeopathic system, under the supervision of an allopathic committee of physicians. This request was granted to Dr. D. and a hospital of forty beds entrusted to his care. But by the intrigues of the allopathic fraternity he got but one patient to treat, a child with angina scarlatinosa gangrænosa, which died. No other patient was entrusted to his care. It may easily be imagined that after this complete failure Dr. D. was insulted and abused in the papers by the enemies of homocopathy, and the system of Hahnemann denounced as a fraud. Dr. Bojanus therefore advises the German homogopaths not to establish a homocopathic hospital in a city where there is a Digitized by GOOGLE university, but rather in a place like Görlitz, where there is a

large population of working men.

Dr. B. is convinced that as long as homosopathic hospitals or dispensaries are under the control and supervision of allopathic authorities, they can never flourish. Only where such institutions are entirely independent, as they are in North America, they are in a prosperous condition.

Finally, Dr. B. states that in Moscow two allopathic physicians have become converts to homosopathy, and in Petersbourg two sons of Dr. Bojanus are now practising homosopathy.

### SPAIN.

### By Dr. F. G. RUBIO, Malaga.

Dr. Russo states that there are 53 homosopathic practitioners in Madrid, 41 in Barcelona, and 43 in other parts of Spain<sup>1</sup>—altogether 137. There are four homosopathic journals. The Hospital San José, at Madrid, continues to flourish; and the Medical School connected with it has between 40 and 50 students. There are dispensaries in vigorous operation at Madrid and Malaga, and in most cities where homosopathy has a representative.

### SWITZERLAND.

## By Dr. BRUOKNER, Basle.

During the last ten years (when Dr. Bruckner reported to the Convention of 1876) about ten homeopathic practitioners have passed away in various parts of Switzerland; but there are 23 now practising the system. They meet annually for conference in one of the towns of the confederation.

## United States of America.

By Bushrod W. James, M.D., Philadelphia.

Dr. James begins by giving the following statistics as to the present position of homosopathy in the United States:—

Of Practitioners, there are about 10,000.

Of Medical Colleges, 13; with about 1,000 fresh matriculants and 400 graduates annually.

Of Hospitals, 51; with 4,000 beds.

Of Insane Asylums, 3.

Of Dispensaries, 48.

Of Societies, 143. Of Journals, 22.

Of Phormacies, 88.

Regarding the Colleges, he notes a progressive elevation in

<sup>1</sup> This list is probably imperfect, for it omits Bilbao, where there is certainly one homocopathist.—ED. of the *Précis*.

the standard of medical education. The multiplication of capable specialists in our ranks is much aided by the special training provided in the New York Ophthalmic College and Hospital, which is authorised to confer the diploma of "Occuli et Auris-

Chirurgus " upon its students.

Our hospitals are receiving large aid, both from private donations and from State subventions. Among the latter may be mentioned the assignment to homosopathists of the Westborough Insane Asylum, with 180,000 dollars for its equipment. The State of Massachusetts, to which this grant is due, has also established the Newton General Hospital near Boston, and divided the medical and surgical staff equally between old-school and homosopathic physicians. A similar assignment has been made in the Cook County Hospital at Chicago. Providence, Washington, and Pittsburgh have corresponding liberality to record from the authorities of their respective States; and the Hahnemann Medical College and Hospital of Philadelphia, the oldest institution of its kind in the country, is about to take possession of a new and thoroughly equipped building.

To the National Societies extant at the last report is to be added a "Southern Homeopathic Association," which (it is hoped) will do much to promote unity and progress among the

homosopathists of the Southern States.

Dr. James considers the great success of homosopathy in the United States due to the fact that it appeals directly to the people, with whom power resides; though he recognises the greater freedom with which young societies are permeated by new ideas.

Dr. RUNNELS said in reference to the United States that the figures given by Dr. James were only rough. The old school is honeycombed by the practice of homoeopathy. Aconite and belladonna in tumblers of water, singly or in alternation, was The "omnibus prescription" quite a common occurrence. How soon the clandestine recruits will had passed on. come openly into the ranks he could not say. At present they continue to fight homocopathists. This is also manifest in the "Code of Ethics," in that the members of societies acknowledging that code are forbidden to meet homeopathists. This rule has been strongly attacked. The batteringram of public opinion is fast knocking the Code to pieces. Two other colleges have been founded since the report of Dr. James, making fifteen in all. Then there is State aid. School lands have been sold and universities founded with the In Boston, Michigan, and other places, homocopathy has come in for a share of this, having schools of homocopathy in universities so endowed. Homosopaths have gained recognition from the Government in the grant of 15,000 dollars to the establishment of a homeopathic hospital in Washington, and a

further grant of 5,000 dollars, which may be expected to form a regular item in the Budget. There are many other government donations to colleges. They possess the Insane Hospital of Middleton; and the Massachusetts government have given land, buildings, and money to the value of upwards of 500,000 dollars altogether to the Westborough Insane Asylum, which is in the hands of homeopathists. In Chicago the homeopaths have one fourth of the whole hospital, which is one of the largest in the States. There has been a temporary loss of an insane hospital in Michigan through the alteration of one word in the title-deeds. In Ohio a homeopathist has been appointed to the State prison. Homeopathists take great interest in hygiene. Every avenue of trade and science is feeling the effect of progress in homeopathy.

Summarising, he said homocopathy had a fair measure of success, but it was not evenly successful all over. He was saddened by the report from this side, but he believed the reflux

would come.

Dr. MEYHOFFER, having resumed the chair, called on Dr. Clarke to open the discussion on Dr. Dudgeon's paper, of which the following is the *précis*:

### ESSAYS.

## "EN AVANT."

By R. E. DUDGEON, M.D., London, England.

The author asks: 1st, why is homosopathy regarded with

aversion by the medical profession?

In its early days there was sufficient reason for this in the complete opposition of homeopathy to established and traditional methods of treatment and to all the current theories of disease and cure. The prejudices and interests of the profession were arrayed against it. It was also contrary to the interests of the apothecaries. By its greater success in the treatment of disease, by shortening the duration of the treatment, and by enabling patients to treat themselves for all the slighter ailments, it naturally diminished the funds derivable from practice. As the medical profession is overstocked and the great mass can barely keep themselves, any proposal to diminish the profits of treatment would meet with the most vigorous opposition. Homeopathists always assert that homeopathy cures diseases more quickly and with less outlay on the patient's part. But this, in place of being a recommendation, is just the reverse to the great mass of struggling practitioners. They welcome any new method that increases the work of the doctor, such as new and powerfully-acting medicines, electrical applications, hypodermic injections, etc.; but a system that diminishes the work of the doctor goes against their prejudices and material interests.

2nd. What can we do to promote the general adoption of homoeopathy? At its first introduction homoeopathy spread rapidly among the intelligent classes, because it was zealously propagated among the public by popular literature, lectures and meetings, and because it offered a mild system of medication which contrasted strongly with the violent and often painful methods of the old school. But gradually the old school abandoned these rough methods, gave up bleeding and the painful and perturbing methods they had hitherto used, and homeopathists, seeing this, trusted that the old school would go a step further and adopt homeopathy. Therefore they left off appealing to the public and addressed themselves to the pro-The public, no longer directly appealed to, fession only. ceased to interest themselves in the new system, and the profession, no longer influenced by the patient world, ceased to furnish new converts to homocopathy, but took from homocopathy its medicines and methods, while they continued to misrepresent and deride the doctrine from which they derived their remedies. Homcopathists found that all their appeals to the old school remained unheeded. In order to influence the profession, we must do as the earlier pioneers of homosopathy did, and resume the propaganda of our system among the public, who will in their turn force the old school to adopt the doctrine as well as the remedies of homosopathy, which they now only use empirically. The profession on the whole will gain by adopting homeopathy, as patients will then regain the confidence in medicine which they have in great measure lost, in consequence of the acknowledged uncertainty of treatment and the open boast of medical men that they are guided by no therapeutic principle. When the profession is agreed on the adoption of the only true and rational homosopathic rule, and the public know this, they will cease to dread the haphazard treatment of a doctor, and will lose their love for quack medicines, whose use will thus appear to them irrational.

Dr. CLARKE said that there were few men who had done more than his friend Dr. Dudgeon to convince the medical profession of the truth of homeopathy. For forty years he had directed all his efforts to this end, appealing to the profession in the most professional of ways, and he had now come to the conclusion that it was of no use. Practically it had had no result worth speaking of. Hence he had come to the conclusion, and others had come to the same, that it was time to make a change in our tactics and appeal to the profession no longer, but to the public. Dr. Clarke referred to the action that had arisen out of this decision as embodied in the Homeopathic League. He briefly alluded to the origin of the movement, and drew the attention of the Convention to the memorial presented to the Board of Management of the London Homeopathic Hospital by a deputa-

tion from the League on June 30th, mentioning that a number of copies of the HOMEOPATHIC WORLD containing that memorial were in the hall, and any member was at liberty to He was happy to inform the members that the venerable Lord Ebury had accepted the presidency of the League, and that a lay secretary had been appointed. movement was intended to be essentially a lay one. In theearly days of homocopathy in Great Britain, when the appeal was made to the laity, medical men joined our ranks in numbers. When that was stopped our numbers ceased to increase. Clarke then showed the work of the League, the character of the work done, and the tracts already issued. He said that the general public were exceedingly ignorant as to what homeopathy really was, and if they were enlightened the strength of allopathy would be gone. He gave instances, and among others his own case, in which the enlightenment of lay homocopathshad led to the conversion of medical men. He was delighted to find a similar lay society started in Germany, and hoped that they might soon join hands, and that the movement might be placed on an international basis.

Dr. B. SCHMITZ desired to render homage to Dr. Dudgeon forhis efforts to bring before the public and the profession the pilferings of homeopathy by the allopaths. Dr. Schmitz desired that official notice should be taken of these as preserving

priority of discovery to those to whom it belongs.

Dr. Leon Simon said: The question we treat of at present is one of the greatest importance and of the greatest difficulty. We must act with the greatest prudence in addressing the laity. On the one hand we are open to the accusation of charlatanism, and I therefore recommend that where there is no absolute necessity no name be appended to the articles or tracts, and, above all, that we never give our address. On the other hand, doctors deprived of their diplomas, or even legally qualified doctors, but really charlatans, can take advantage of our being homosopaths, and publish under the name of electro-homosopathy, or of homosopathy with some epithet or other added, pamphlets which are neither homosopathic nor even scientific. This will put us under an undeserved discredit, which would prove very injurious to us.

Dr. Roth said that we tried to aim at what Dr. Simon referred to. No author's names are to appear appended to the publications, and nothing unworthy will be produced. He had a number of the tracts for any members who desired to see them.

Dr. Heermann asked if the right of translation was reserved,

and was answered in the negative.

Dr. RUNNELS said this was an important matter. Our missionary work had suffered from practitioners not having been able to do that as well as their practices. It was on a right footing being in the hands of the laity. The speaker was

warmly in favour of it, and thought that something here ought to be done to spread the movement abroad. He would do all he could to spread it in his country.

Dr. HEERMANN asked that this be voted on, and that the motion of Dr. Runnels be seconded. The thing is good. Let the

Congress vote.

Dr. WILDER said one question occurred to him. How are additions made to homosopathy in Great Britain if homosopathists

have to go through the old school?

Dr. Hughes said that as we have no colleges we depend on converts, and on the sons of homosopathists. There is no hindrance to the practice of homosopathy, but all must pass through the same curriculum.

Dr. CLARKE added a few remarks on what is incumbent on American graduates in order to enable them to practise in England; and stated that American graduates could practise in England without an English diploma, but they could not be placed on the British register, and did not possess the same legal

standing as those who were registered.

Dr. MEYHOFFER said it was different on the Continent. No medical man, however high a degree he may have taken in his own country, can practise in another country unless he has gone through another examination in the country in which he intends to practise. The examination may be harder or it may be much easier than that he has already passed, but it cannot be avoided.

He then put to the Convention the following resolution:—

"That this Convention heartily approves of the movement initiated by the Homosopathic League, and recommends that steps be taken to make it international.

Proposed by Dr. Runnels, seconded by Dr. Heermann.

This was carried unanimously.

The proceedings of the morning then terminated.

The report of the SECTIONAL MEETINGS will be held over and appear in our next issue.

### SOCIAL GATHERING.

On Tuesday evening, at six o'clock, the members dined together in the large dining-hall of the hotel. The time passed most pleasantly, and after the dinner three official toasts were proposed: 1st, "The Swiss Confederation," by Dr. Meyhoffer, responded to by Dr. Meschlin, of Bâle; 2nd, "The Memory of Hahnemann," proposed by Dr. Wesselhoeft, and drunk, as always, in solemn silence; and 3rd, "Florest Homoopathia," proposed in a graceful speech by Dr. Léon Simon. Afterwards "The Ladies" (whose presence greatly enlivened the proceedings) were toasted by Dr. Roth in English, French, and German, and Dr. Heer-

mann, fils, in a witty speech, answered for them, also in all three languages.

# SECOND DAY. — Wednesday, August 4th. MATERIA MEDICA.

The President said that the subject of the discussion for the day was one of the greatest possible importance. He hoped that gentlemen would take the liveliest part in the discussion.

He called on Dr. Hughes to give his report.

Dr. Hughes said that, as one of the editors of the new work, he appeared before them to give an account of the Cyclopædia of Drug Pathogenesy, and its claims to be considered the Materia Medica of the future. It had special claims, and was no individual venture of a single author or of a publishing firm. It was the joint work of two national societies. Its commercial interests were already assured. The judgment of the Congress is asked on the first volume. The work purports to be a revision of the Materia Medica. It aims to be a pure record of pathogenetic effects. Formerly our Materia Medicas have been dis-figured by the presence of clinical symptoms. The elimination of these is the first task. The next work is that of sifting. All recognise that provings are not all alike satisfactory. Dr. Allen admitted some into his Encyclopadia which in the Index he ignored. The authors have only given their sanction to what they have confidence in guaranteeing as perfectly satisfactory. Those less highly regarded are printed in smaller type, and this type has been used also for those medicines not regarded as of primary importance.

The next point is that of proving by dilutions. Without judging others, it has been deemed advisable to draw the line at the 6th centesimal dilution. This is merely a practical com-

promise.

Then has come the work of reconstruction. Hitherto it has been the practice to cut provings up into a schema. It was thought that the student ought to have the symptoms in their original relations. There are some provings only extant in schema form, and these have been as far as possible reduced to

harmony with the general tenor of the work.

Lastly, he said that all matter had been taken from its original source whenever possible. He invited the judgment of the Congress on this work, and emphasised the importance of the judgment it would pronounce. He concluded by quoting the words of Dr. Runnels in his Presidential address at Saratoga—"The purity and reliability of our Materia Medica is a consummation to be desired by all; but we have hardly yet begun to realise the great work that is here being accomplished for our science. To have the pathogenesis of every drug well authenticated; to have it freed from all error; to have it present the

real truth of drug-ability in every instance, is to plant the feet of every prescriber on the bed-rock of certainty; is to supply him with knowledge that will sustain him in the hours of extremity;" and Dr. Hughes hoped that this meeting would give its endorsement to Dr. Runnels' words.

The President having translated Dr. Hughes's remarks in brief called the attention of the meeting to the resumé of the

papers given below, and then opened the discussion.

### Resumé.

# A CRITICISM ON THE Cyclopadia of Drug Pathogenesy. By Dr. Imbert-Gourbeyee, Royat, France.

The author begins by pointing out that the name papulator indicates that all drugs are first of all poisons, and hence the importance of knowing their poisonous action. The Cyclopadia gives us for the first time an opportunity of studying the physiology of drugs by presenting their effects in the order of their evolution. It is also very valuable as bringing together in an accessible form all available knowledge derived from the fourseurces of (1) poisonings, (2) over-dosings, and (3, 4) experiments on men and animals. He is especially pleased with the classification of the arsenical poisonings. He seems to regard this work, however, rather as material for a future building than as an end in itself; though he does not indicate the manner in which he would have such building erected.

## THE PRESENTATION OF THE MATERIA MEDICA. By RICHARD HUGHES, L.R.C.P., Brighton, Eng.

The author observes that the presentation, in the Cyclopadia of Drug Pathogenesy, of the provings and poisonings with drugs in narrative detail, has excited much attention on the Continent, and that some critics seem to consider the schema as at least as good a form. He, on the other hand, believes the latter to be unnecessary, misleading, and pernicious.

The Materia Medica may be used homocopathically either

d priori or d posteriori.

1. On the first plan, it is studied beforehand, and for this purpose the author maintains the schema to be most prejudicial, as rendering pathogenesy uninteresting and unintelligible. It has thus operated injuriously (a) by robbing Hahnemann of his due credit as the father of experimental pharmacology; (b) by deterring many would-be inquirers from the study of homoeopathy; and (c) by driving its practitioners to empirical use of remedies instead of fresh homoeopathic selection.

2. When the Materia Medica is used by way of reference in presence of a case, the schematic arrangement is unnecessary for symptom-finding, as that is provided for by an index. On the other hand, it is misleading, as symptoms become falsely interpreted when divorced from their concomitants, and often

assume (when isolated) a prominence not their due. The author combats the doctrine that symptoms are susceptible of indefinite variations in grouping, as maintained by Drs. Allen and

Farrington.

He finally pleads for the detailed provings and poisonings as the fundamental Materia Medica of homocopathy, to be studied by every learner and referred to by every practitioner; all other arrangements of pathogenesy to be regarded as merely introductions and applications.

On the Additions to the Cyclopadia of Drug Pathogenesy requisite to make it of full use to the Practitioner.

By J. DRYSDALE, M.D., Liverpool, England.

The author warmly approves of the work done by the Cyclopedia in sifting the matter of our pathogenesy, and presenting it in intelligible and connected form. To make it available for practice, however, there is needed an index to the symptoms, and a physiological and therapeutic commentary, with such general information about the drug as is given in ordinary works on Materia Medica. It is proposed to supply these in a companion volume. Dr. Drysdale argues here that for future volumes of the Cyclopedia it will be better to incorporate such matter with the pathogenesis of each medicine, so giving the practitioner less trouble in reference, and keeping him from the danger of falling into the easier way of empiricism.

### Discussion.

Dr. Hobart opened the discussion by moving—"That we do heartily approve of this work, and tender to Dr. Hughes and the other Editors cordial thanks for their earnest, arduous, and successful labours."

Dr. Roth seconded this motion.

Dr. Hobart then said that the reference to the schema was very much to the point. When he commenced the study of Materia Medica he was given Jahr. This was very confusing to the student. Medicines should be known individually. Clinical symptoms must be eliminated. Homeopathy cannot be advanced in any way better than by improving the Materia Medica. In America the discussions had run too much on other things. The Materia Medica is the chief thing. In this work, going back to original sources brings within the reach of teachers and students material which they could not come across in other ways. There is a movement in America for making the meetings on Materia Medica at the Conventions general instead of sectional meetings.

Dr. HREEMANN said it was the great wish of Dr. Hering to see this work done, because our Materia Medica is our basis and our apex. Hence this is one of the grandest works we can wish for, and the conclusions should be well weighed. He ques-

tioned whether the eliminations had not been too great to allow of the work being named the "Materia Medica of the Future." The cures by the pellet have been put aside; yet this is some of the experience of the past which we could have done badly without. This is not in place in the body of a Materia Medica Pura, but it might be put at the foot of the page. Dr. Heermann met with a patient who had a symptom outside the body haunting her. He had found it in three instances as a result of Sepis. He had found an individual who saw white with his right eye. Under Phos. he found there was white vision with right eye, and also the arteries were out of order. This led him to the arteries, and he found an aneurism. This experience he would put at the bottom of the page. So he objected to the experience of the pellet being altogether put aside. Again, he found a line of demarcation had been agreed to; but some persons are so susceptible that the 3rd and 6th have no effect, but going to the 100th or 1000th symptoms appear which you get in no one else. He would put these at the bottom of the page as an addendum. This work will be the basis of the Materia Medica Pura, but it does not go as far as it should go. What is wanting in all pure Materia Medicas is the experience of our forefathers. This distinguishes some of the earlier works. The great desideratum is to know such medicines have such and such symptoms. Our Materia Medica some day will arrive at this. We shall see that certain symptoms belong to certain organs,—e.g., Nux Vomics to the colar plexus and spinal cord. A medicine should be studied in its outlines, and the organs to which it has relation should be specially noticed. He asked Dr. Hughes to read a case he had published illustrating this point.

Dr. Hughes said his case was to show that symptoms may sometimes not correspond with actual conditions. It was the case of a lady who was suffering from gall-stones. The lady had, he said, had severe salivation in all her pregnancies, and now, when suffering from gall-stones, the same salivation appeared again. A medical friend prescribed Kali Bichrom. for the salivation. Dr. Hughes objected, on the ground that the salivation of Kali Bichrom. was only part of the general sickness and nausea produced by massive doses and not a pure pathogenetic effect. No result followed. When Kali Iod. was given, cure speedily followed, this medicine having very decided

power of causing salivation specifically.

Dr. HEERMANN resumed. If we have a Materia Medica without experience, a student will be apt to seize on a single symptom, as in this case, without getting at the real pathological condition. We require for this that the experience of our forefathers should not be left out of view, and that the meaning of each symptom, pathologically, should be sought. Besides, we require the schema. The schema has this ad-

vantage, it is much easier to refer to than this book, and almost

the whole of the symptoms are more easily reached.

Dr. Smon said he had received from Dr. Gailliard the following facts. Dr. Attomyr told him that he had experimented with six drugs, and they had produced identical effects, fever, ery-What can we conclude from this? That Dr. thema, etc. Attomyr had a peculiar constitution. Therefore he requested all provers to note their temperament and susceptibilities. Hughes rightly does not allow that symptoms admit of indefinite groupings. For example, a pain at the lower end of the shoulder-blade generally accompanies liver disease, and vice versa; but the shoulder pain must not be artificially separated from this relationship. The bizarre symptoms noted by some provers, Dr. Simon urged, should not be neglected. He instanced a case of facial neuralgia, in which cold water in the mouth relieved the patient, the pain coming back more violently when the water got warm. Bismuth has this symptom, and cured the case in forty-eight hours. He thought the schema necessary; it was to be compared to a dictionary in learning a language. We do not commence to learn a language by reading a dictionary, but it is indispensable.

Dr. RUNNELS gave his hearty support to this work. It was not final. (Hear, hear.) It is a fair beginning along the the right way. It is somewhat in the nature of a compromise. But what is left out will not be lost. (Hear, hear.) We don't lose anything. We are gaining ground. Speaking of symptoms from dilutions above the 6th potency, he thought the editors have done rightly to retain symptoms when observed from provings in dilutions both above and below. In reference to the case of Dr. Simon, he said he had cured facial neuralgia of the same

kind with Coffee 30 with great rapidity.

Dr. B. Schmitz said that no materia medica could be perfect, and cited the Materia Medica of Hahnemann to show that there was a limit, the 30th dilution, beyond which no pathogenetic symptoms were taken. He showed that Hahnemann took many symptoms from diseased persons, thus indicating that Hahne-

mann's Materia Medica was not altogether a pure one.

Dr. Mossa said it is to be looked at in point of science, and in point of practice. From the scientific point of view it is a great work; but the work is also practical. It offers to the medical student and practitioner a source of information of great importance, and it is also valuable for our colleges of the old school. He thinks that teachers will find in it a great treasure. He thought the old school would prize it as soon as they knew that to know the positive effects of a drug was to know its curative effects as well. He concluded by praising his teacher, Dr. Gross.

Dr. Pope said that it was very gratifying to all the workers to

see the way in which their work had been received. He said that the chief credit was due to Dr. Hughes. He referred to Dr. Heermann's criticism of the omission of clinical symptoms; their place is in therapeutic commentaries. It is highly important that clinical symptoms should be observed more than ence. Dr. Drysdale would have the pure materia medica combined with commentary. Dr. Pope did not agree with this.

Dr. CLARKE said that he had much sympathy with the remarks of Dr. Heermann. He felt the work was open to criticism on many sides; and he had a great desire, when possible, to have everything in a single book. But it was not possible in such a case as this. Compromise was necessary: and, judged from the fallible human standpoint, the work was simply a magnificent one. There was no reason why those who approved of provings with the higher dilutions should not collect them; and no reason why those who approved of clinical symptoms should not also collect them. He regarded the Cyclopædia as a foundation work. It was not the whole of our foundation, but it was a good half of it. Clinical experience was the other half. He did not look upon this as a work to be put into the hands of students already suffering from the effects of "over-pressure," but as a work for the teachers of materia medica to work upon, and to digest (with the other works on therapeutics) for the benefit of their students, in the text-books they put into their hands. These text-books should be primers to introduce students to the practice of their art, to the proper use of the Cyclopadia, the schema, and other works in constant use among us. He could not shut his eyes to the value of clinical symptoms with the Chronic Diseases of Hahnemann before him, and the multitudinous confirmations of them. He joined with Dr. Pope in his admiration of Dr. Hughes, and the manner in which he had fought for the work, often against great opposition, on both sides of the Atlantic. He had watched Dr. Hughes for years, and the way in which he had overcome all obstacles, and made the execution of the work practicable, he regarded as wholly admirable.

Dr. Noble testified to the interest with which the younger members regard the recent work. He said it was not to be compared to schemas. He passed an encomium on Dr. Hughes for his work on *Pharmacodynamics*, and compared the *Cyclopadia* 

with this.

Dr. Roth pointed out that Dr. David Roth was the first who had the courage, forty years ago, to stand up against the corruption of the materia medica. Hahnemann's second wife called him "the poisonous serpent" on account of his fearless criticism. Dr. D. Roth's great work was Médicine Clinicale, in which cases of cure by single remedies were collected. Among the provers of Hahnemann one Langhammer was always ill;

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the symptoms he published were real symptoms, but they were the symptoms of his sickness and not of the medicines.

Dr. Hughes, who was received with loud cheers, thanked the assembly for the appreciative reception accorded to this work. This would enable him to go back to it with renewed heart, and he hoped that at the next quinquennial meeting the whole of the five volumes would be completed and presented. In answer to Dr. Heermann he said that Dr. Runnels had anticipated his reply. When the work was complete it was hoped to add an index such as Dr. Drysdale suggested, and a work embodying clinical experience. The work was only a foundation, but he hoped it was a strong and pure one. (Loud cheers.)

Dr. MEYHOFFER said he did not rise to criticise. In all pathogeneses there is one point missing, that is, in the various experiments made on men there is rarely an analysis of one of our most important excretions, the urine, which shows the variations in nutrition within us. This should be accurately attended to in future. The specific gravity and abnormal elements, these should all be accurately considered. He was led to this remark by the case of a patient whose urine exhibited a specific gravity of 10·30. There was sugar, but on analysing the urine the salts were much below the usual standard. The use of arsenic in two or three days increased the quantity of the salts, and the sugar diminished. In this case the specific gravity did not show the quantity of sugar but the poverty of

this respect.

The President then called on Dr. Clarke to read the resumé

salts, and if no attention had been paid to the latter, error would have resulted. Hence in all provings the necessity of care in

of his paper, which ran as follows:

## Notes on Nicotism.

By JOHN H. CLARKE, M.D., London, England.

The author maintains that all employers of tobacco are the subjects of poisoning; and that the comparative absence of symptoms during its habitual use is a "tolerance" analogous to that of arenic eating. Its sudden discontinuance often leads to "tertiary" effects similar to those resulting from its primary adoption; and the same may occur from temporary excess or lowered resistance on the part of the "nicotist." The "intermediate stage" is one of saturation with the drug, kept up by recurrence to it as soon as a sense of craving shows that its influence is waning. Its evil effects here are shown in the eye, the heart, and the nervous system generally; and also by local action in the throat.

The author regards alcohol as too similar to tobacco to be a safe antidote for it in ordinary quantities: Nux vomica is, in his

judgment, the great remedy for nicotism; while he finds camphor of much value in subduing the craving for the poison in those who are endeavouring to break off its use.

Dr. CLARKE amplified this summary in some particulars.

#### Discussion.

Dr. Mossa mentioned that Professor Eilenburg, in his work on the sympathetic, has mentioned a form of angina pectoris due to nicotism, where the pain ceases as soon as tobacco is left off. In animals the effects were similar to those of *Digitalis*, but all the animals were first poisoned by *Curare*, which interfered with the effects.

Dr. RUNNELS regretted that the meeting had not heard the paper in full. It was a very important subject, and one on which there was much to be said. We shall have to make a more definite record. Whenever we say anything against the habit we encounter the prejudices of large numbers of nicotists, who say we are fanatics; they have smoked for years, and it has never hurt them in the least. Close analysis will show that it has hurt them, and has left its mark. The chief criticism he had to make on drug symptoms was that they are often taken from provers under the influence of a much stronger drug (as tobacco) than the one they were proving. Nicotistssay it does not hurt them. He maintained they are generally affected by piles, liver or heart disease, or what is called in America, for want of another name, "malaria." You can often trace the effects of tobacco into the next generation. Many cases of anæmia, dysmenorrhæa, and epilepsy in children are due to nicotism in parents. This is only one example. and coffee are others. Dyspepsia, functional disease of the heart and other maladies, are induced by the use of these. We take black coffee to antidote opium, and if it is potent enough for this, the habitual use of it must give us a proving. Let us never take provings from persons who are bound hand and foot to some poisonous drug.

Dr. Cooper had given consideration to the subject from time to time. He could say with all reverence, with Kingsley, that when the Great Architect of all things created the world He created nothing better than tobacco. He believed that the human race had benefitted by nothing so much as tobacco. He acknowledged the evil done by tobacco, but he thought the habit of expectorating was the chief evil. He said there was nothing that would not do harm. One of the most remarkable things was the enormous quantities that could be taken without visible effects. He mentioned a case in which a person who had taken enormous quantities of tobacco left it off without the smallest difficulty after taking it for fifty years. Tobacco was not so much used as it ought to be in medicine. Tobacco 3x did.

most good in one case. He hoped to give an account of the medicinal use of the drug together with that of *Lobelia* some day. If given in high dilution it would produce pathogenetic effects, but if given in the crude form it did less harm than any

herb under the canopy of heaven.

Dr. Schädler rather agreed with Dr. Cooper than Dr. Runnels; he was no friend of tobacco, but he mentioned that Hahnemann smoked continually. Dr. Schädler's grandfather lived to ninety, and smoked till within a week of his death. There are cases in which the effects are bad. A colleague at Thun suffered from terrible attacks of angina pectoris, and never had it from the time he left off smoking. He has seen sickness and giddiness caused by it. He is himself no smoker.

Dr. HEERMANN said there were great differences in different cases of tobacco poisoning. Staphysagria was sometimes needed for the severe anæmia caused by it, sometimes Arsenic. Phosphorus had to be used to cure one case of nicotism in his practice where

there was intense anæmia of the brain.

Dr. Mossa mentioned, in reply to Dr. Cooper, that it is not a bad habit to expectorate if you smoke; as the smoke acts on the

salivary glands expectoration is necessary.

Dr. NIELD said he was obliged to Dr. Clarke for introducing this subject. He endorsed his experience, and agreed with what Dr. Runnels had said. Dr. Cooper's argument was answered by Dr. Mossa. His arguments would apply equally well to the use of Arsenic, Opium, and Cannabis. The case mentioned by Dr. Cooper was an exception. Most persons suffer much in giving up tobacco. Those who give it up suffer from want of

sleep or constipation.

Dr. CLARKE (in reply) thanked the Congress for the kind reception they had given to his paper, and said that if gentlemen had had the opportunity of reading the paper in extense they would have found that he had merely stated the facts of his experience, and had drawn no inferences as to the habit in itself; but if the facts were found to lead to the inferences condemnatory of the habit which Dr. Cooper seemed to anticipate, he had no objection. The points raised by Dr. Cooper were for the most part anticipated by the substance of the paper. He had used the terms nicotism and nicotist to avoid the use of cumbrous phrases, since all tobacco-takers did not smoke, some of them taking snuff and others chewing. The case named by Dr. Cooper proved nothing, any more than the case of Professor Hamilton of Edinburgh, who could take enormous quantities of laudanum without experiencing any effect at all. Dr. Clarke said that in his paper he had specially mentioned that his observations were confined to the effect of the tobacco used in England and by British subjects. He told a story of a German doctor (told him by a colleague who was present at the consultation)

who, whilst wrapping up powders for a patient, smoking all the while and blowing clouds of smoke into the powders, was very particular to warn the patient to be extremely careful to keep the medicine out of the reach of any strong-smelling substances! When the patient had gone the narrator of the story asked the doctor what was the good of his instructions when he was all the time smoking into the powders. "Oh!" said the doctor, "that is not of the least account, tobacco-smoke is the natural atmosphere of a German." (Laughter.)

The President then put the following resolution:

"That we do most heartily endorse the Cyclopadia of Drug Pathogonesy; and that we also tender our sincere thanks to Dr. Hughes and his fellow-workers for their most excellent and indefatigable labours in preparing this great and exceedingly important work upon Materia Medica."

Proposed by Dr. Hobart, seconded by Dr. Roth, and carried

unanimously.

This concluded the proceedings of the second morning.

#### SECOND EVENING.

The official toasts of this evening were, as on the first evening, three in number: "Homocopathic Hospitals and Dispensaries the World Over," which was proposed by Major Vaughan Morgan, and responded to by Dr. Hobart; "Homocopathic Societies," proposed by Dr. Heermann, and replied to by Dr. Runnels; and lastly, "Homocopathic Journals and Literature." Dr. Lambreghts, fils, proposed the last, and coupled with it the names of Drs. Pope, Clarke, Simon, and Oscar Hansen. Each of these gentlemen spoke in reply. The unofficial toasts were, "The Health of the Chief Editor of the Cyclopadia, Dr. Hughes," proposed by Dr. Heermann; and "The Prosperity of Homocopathic Pharmacy," proposed by Dr. Hughes and responded to by Mr. John Wyborn.

### THIRD DAY.—Thursday, August 5th.

We regret that the fulness of our report compels us to hold over till next month the whole of the discussions of the third day comprised under the heading Therapeutics. They were, as will be seen, of a highly important and interesting character. We conclude this article with an account of the business meeting in the afternoon and the festivities of the evening.

### AFTERNOON MEETING.—August 5th.

The PRESIDENT having opened the meeting, letters from Dr. Ludlam, of Chicago, and others, were read by Dr. Hughes, wishing success to the meeting and regretting their inability to be present.

Dr. Gallavardin reported by letter that he had followed out

his investigations in respect to the influence of homoeopathy on the temperament, and had met with much success.

Dr. VILLERS writes requesting information on epilepsy, which

he is studying. He resides near Leipsig.

Dr. Schleger wrote a letter protesting against the action of the editor of the Allgemeine Hom. Zeitung in snubbing this Congress. Another was from Dr. Meyer, of Albertsbad. The last letter was from Dr. Gailliard, of Brussels, writing to excuse himself from attending on account of family affliction, and protesting against unjust accusations to the effect that the Belgian homosopaths were not able to carry the Congress to a successful issue.

Dr. Hughes then read a communication he had received from India, from Dr. Majumdar, showing the great advances being made by homoeopathy in that country.

#### SELECTION OF PLACE OF MEETING.

Dr. Pope proposed that it should be in one of the Eastern

States of America in 1891.

Dr. Runnels seconded the resolution, but would suggest that they should leave the selection of place to the Americans, as the term "Eastern" referred only to a small strip of the country. "Eastern" was omitted from the motion, it being understood that the meeting-place would be as near Europe as possible, and the motion was then carried without a dissentient.

#### PERMANENT SECRETARY.

The President put it at once to the vote that Dr. Hughes should be re-elected, which was done by acclamation.

Dr. Pope said there was no necessity for the re-election, as the

office was perpetual.

Dr. Hughes, in accepting, said he thought it better that the secretary should be elected at each Congress.

A question from Dr. Bonino—Whether there is only one single remedy for a given pathological condition at the time of the physician's intervention; in other words, whether there are homeopathic substitutes?

Dr. MEYHOFFER said Dr. Bonino had put a question that often puzzles a practising physician, when two medicines seem equally indicated. He wanted to know how the differences may be recognised, or if one may take either the one or the other.

Dr. HUGHES suggested that there was not time to discuss this interesting question, though he would be happy to publish Dr. Bonino's paper in the Transactions.

Dr. LESEURE asked about the finances.

Dr. Hughes said that we were in a peculiar position. The doctors of the country who invited the others usually took upon

themselves all the expenses. It was felt best, on the present occasion, to leave it open to those who wished to subscribe to do The treasurer reported £8 as having been received, and £30 from America. Dr. Clarke had received £5 and promises of £3 more.1 The expenses of this meeting would not be great. The proprietor of the hotel had given the use of the room. The only outlay had been for printing, and the future expenses will be those of publishing the Transactions. Dr. Roth had suggested that they should appear in the Homeopathic Review first, which would further reduce the expenses.

Dr. RUNNELS said he would like to ask a question, whether those who subscribed in America would be entitled to a copy of

the Transactions?

Dr. Hughes said every subscriber would receive a copy of the Transactions.

Dr. Hughes reported resolutions passed at sectional meetings regarding Over-pressure in Schools and the desirability of an International Homoopathic Pharmacopoia, and the appointment of a commission, Dr. Cowl, Dr. Giesecke, and Mr. John

The full list of subscriptions and promises is as follows:—

RECEIVED FOR INTERNATIONAL CONGRESS OF 1886.

Dr. Clarke, London, £1 1s.; Dr. Drysdale, Liverpool, £3; Dr. W. Epps, London, £1 1s.; Dr. M. Roth, London, £1 1s.; Dr. Boniface Schmitz, Antwerp (20 fr.), 16s.; Dr. Dudgeon, London, £1 ls.; Dr. Nield, Tunbridge Wells, £1 ls.; Mr. T. Engall, London, 10s. 6d.; Dr. Pope, Tunbridge Wells, £1 ls.; Dr. Oscar Hansen, Copenhagen, £2 10s.—Total, £13 2s. 6d.

At the Meeting of the American Institute of Homeopathy the following At the Meeting of the American Institute of Homeopathy the following subscribed 5 dollars each:—Dr. J. P. Dake, Nashville; Dr. I. T. Talbot, Boston; Dr. C. Wesselhæft, Boston; Dr. C. H. Walker, Boston; Dr. H. E. Spalding, Hingham; Dr. H. B. Clarke, New Bedford; Dr. W. B. Chamberlain, Worcester; Dr. B. W. James, Philadelphia; Dr. M. S. Wilkinson, Philadelphia; Dr. A. R. Thomas, Philadelphia; Dr. J. H. McClelland, Phitsburgh; Dr. J. C. Burgher, Pittsburgh; Dr. L. H. Willard, Pittsburgh; Dr. E. M. Kellog, New York; Dr. H. D. Paine, New York; Dr. T. F. Allen, New York; Dr. T. M. Strong, New York; Dr. A. R. Wright, Buffalo; Dr. A. W. Woodward, Chicago; Dr. E. H. Pratt, Chicago; Dr. A. A. Whipple, Ouincy: Dr. C. L. Cleveland. Cleveland: Dr. N. Schneider. Cleveland: Dr. Quincy; Dr. C. L. Cleveland, Cleveland; Dr. N. Schneider, Cleveland; Dr. G. B. Peck, Providence; Dr. R. Hall, Providence; Dr. W. von Gottschalck, Providence; Dr. R. C. Moffat, Brooklyn; Dr. A. I. Lawyer, Monroe; Dr. O. S. Runnels, Indianapolis; Dr. T. Y. Kinna, Paterson; Dr. G. P. Jefferds, Bangor; Dr. J. V. Hobson, Richmond; Dr. J. A. Rockwell, Norwich; Dr. Anna Warren, Emporia; Dr. A. C. Cowperthwaite, Iowa; Dr. L. Sherman, Milwaukee; Borleit's Food Co., Racine; Dr. B. Arnulphy, Nice, France-Total, £38 17s. 1d.

Received at Bâle: - Major Vaughan Morgan, £1; Dr. Cash, £1 1s.; Dr. Leseure, £1; Dr. Léon Simon, fils (20 fr.), 16s.; Dr. Hobart (20 fr.), 16s.;

Dr. Wilder (10 fr.), 8s.—Total, £5 1s. Promises: Dr. G. Scriven, £1 1s.; Dr. Cooper, £1 1s.; Dr. Noble, £1 1s.

Total, £8 3s.

Received by Dr. Dudgeon, Treasurer, £13 2s. 6d.; received from America, £38 17s. ld.; received by Assistant-Secretary, £5 ls.; promised to Assistant-Secretary, £3 Ss.—Total, £60 3s. 7d.

Wyborn being nominated. Both resolutions were passed unanimously.

There being no other miscellaneous business, the meeting proceeded to Dr. Kafka's paper on Diabetes Mellitus, and

papers by Dr. Ozanam.

At the conclusion of the discussion, Dr. RUNNELS moved a hearty vote of thanks to our worthy President (loud cheers), and also to our worthy Vice-President (loud cheers), whose achievements had reminded them of the day of Pentecost—every man hearing in his own tongue—more than anything he had ever experienced. We were indebted to both alike, and they were as inseparable in our thanks as the Siamese Twins.

Dr. Hughes put it to the vote, which was carried by

acclamation.

Dr. MEYHOFFER said he could only thank the meeting most heartily for the vote. He had greatly enjoyed the Congress; solid work had been done, and he felt that all must carry away pleasant recollections of their association. He concluded by again expressing his thanks, and sat down amidst continued

cheering.

Dr. Schädler wished to express his personal thanks, and those of all his countrymen and colleagues who regretted that they had not been able to be present. In choosing Bâle the hon. sec. had done great honour to Switzerland. At the same time Bâle was appropriate. Bâle had produced men of mark in reform and medicine—Erasmus, Vesalius, Œcolampadius, and Paracelsus,—the precursor of Hahnemann in the search for specifics in medicine.

Dr. ROTH (after translating Dr. Schädler's remarks) added his thanks to those of Dr. Meyhoffer, and said he wished he could have added more to the proceedings of the Congress than he had done. He was loudly applauded both on rising and resuming

his seat.

Dr. Schmitz moved a vote of thanks to Dr. Hughes for his great labours in this Congress, and also to Dr. Clarke, who had worked so closely at his post of Assistant Secretary.

Dr. MEYHOFFER said he had already thanked Dr. Hughes, and he heartily wished him long life and health to complete his

great work.

### Social Gathering.—Thursday Evening, August 5th.

The members of the Convention sat down to dinner on the last evening of the session in undiminished numbers, and with an increased number of lady guests. As on the previous evenings, the proceedings were marked by the greatest cordiality and good-fellowship. After the dinner one official toast was proposed, "Prosperity to the International Homosopathic Conventions,"—proposed by Dr. Rush and responded to by Dr.

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Hughes, they being the only two who had been present at all three meetings. Before sitting down Dr. Hughes proposed "The President and Vice-President," comparing them to twin stars, around whom the rest circled as a planetary system. Both toasts were drunk with great enthusiasm, and the President and Vice-President were cheered long and loudly when they rose to reply. Dr. Meyhoffer expressed the great pleasure it had been to him to be present at the gathering, and concluded by wishing all a happy holiday. Dr. Roth said he had been very glad to assist in the proceedings of the Congress, and at the same time was pleased to have had the opportunity of airing his pet hobbies. He wished prosperity to all.

After other informal toasts had been proposed, including "Our American Visitors," proposed by Dr. Pope, and replied to by Dr. Foster, of Kansas City; "The Ladies," for whom Dr. Scriven replied; the health of Dr. Hughes, chief editor of the Cyclopædia; of Dr. Pope, proposed by Dr. Runnels; of Dr. Clarke, by Dr. Léon Simon; of Dr. Hansen and our Danish colleagues, by Dr. Runnels, and responded to severally by these gentlemen, one of the most pleasant and most successful of meetings was brought to a close, and most of the members took leave of each other to meet again, let us hope, one and all, with many others, five years hence, on the other side of the Atlantic.

### INSTITUTIONS.

## REPORT OF THE HOMEOPATHIC HOSPITAL, WARD'S ISLAND, NEW YORK CITY.

(Through the favour of Dr. Louis de V. Wilder we are enabled to present our readers with this interesting report,

which Dr. Strong has been kind enough to draw up.)

The whole number of patients treated during the year was 3,756; the number of deaths 259—a mortality of 6.90 per cent. Of the deaths, 125 were the result of phthisis in its various forms, and 25 were from cardiac disease; chronic Bright's, etc., making up the rest of the list.

2,113 cases were treated in the Medical department.

 1,175
 ,,
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 Surgical
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 178
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 Erysipelas
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 77
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 Gynæcological
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 140
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 ,,
 Venereal
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 73
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 Ophthalmic
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The per capita cost, including salaries, etc., was 8 dollars 89 cents monthly, or 29 cents daily. The drug and liquor per

capita cost, also included in the above average, was 0.01 cent

daily.

In the Insane department 167 cases were cared for, of which number 14 died. These cases are chronic manias and dementias, and many of them have been ten years or more in the hospital. The deaths were chiefly due to phthisis and general exhaustion

from atrophic degeneration.

From September, 1875, to January 18th, 1886, 1,018 cases of erysipelas were treated at this hospital, with 30 deaths—mortality 2.94 per cent. There were 988 discharged cured, either to the city, or back to other wards for treatment for other conditions. When we take into consideration that the vast majority of our patients are the victims of intemperance; that six were over fifty years of age, one five months old, that ten were only in the hospital four days, of which number three died within twenty-four hours after admission; that one was associated with typhoid fever, eleven with acute alcoholic delirium, five with chronic phthisis, two with acute pneumonia, and several with severe traumata, the mortality list presents even a better showing.

## BRISTOL HOMŒOPATHIC HOSPITAL AND DISPENSARY.

WE have received the Report of the above Institution for 1885, and are glad to learn that, like most other institutions of the kind in this country, it is doing excellent work. The pity is that there are so few of them. The following is a list of the yearly attendances:—

"The attendance, which, from June, 1883, to September, 1884, was 5,144, has been from October, 1884, to December, 1885, 7,450, and the number of monthly tickets, either given by subscribers, or

purchased (mostly the latter), is 2,051."

The medical officers are Drs. Bodman, S. Morgan, Nicholson, and Fallon.

## SPECIAL CORRESPONDENCE.

#### NEW YORK.

The only thing of special interest at present is the recent session of the American Institute, which was the thirty-ninth session and forty-third anniversary; the difference being accounted for by the fact that during the four years of the Civil War the Institute did not hold any sessions.

The Institute met at Saratoga Springs amid charming surroundings and delightful weather. A very large number was in

attendance, and a great many interesting papers were presented and discussed. Subjects like Phthisis Pulmonalis, Hernia, the Hygiene of our Homes, and the Respiratory Diseases of Children were fully discussed, so far as limited time would allow. Next year the Institute will try the sectional plan, so that by having two bureaux reporting at the same time a longer interval

of time can be given to each.

O. S. Runnels, M.D., was the president, and presided with dignity and firmness over the session. He expects to attend the International Convention, and will there represent the American Institute of Homeopathy as the chairman of the delegation from this country. We had the pleasure of meeting at the Institute Dr. and Mrs. Arnulphy, of Nice, and Dr. Becket, of London. The officers for the coming year are:—Dr. F. H. Orme, Atlanta, Ga., President; Dr. A. R. Wright, Buffalo, New York, Vice-President; Dr. E. M. Kellogg. New York City, Treasurer (the twenty-first annual re-election); Dr. J. C. Burgher, Pittsburgh, Pa., General Secretary; Dr. T. M. Strong, Ward's Island, U.S., Provisional Secretary.

The treasurer was authorised to subscribe for four hundred copies of the second volume of the Drug Pathogenesy, at the same rates as for the first volume. The Institute adjourned to re-convene at Saratoga in 1887, when we hope to have the plea-

sure of meeting more of our transatlantic brethren.

The New York Homosopathic Medical College is making vigorous efforts to raise a fund to build a suitable college building and hospital. We trust they will more than realise their wishes, for with clinical facilities equal to their didactic teaching they would be second to none in the country.

The Hahnemann Medical College opens its new building in September next. It is said to be a model building in its convenient arrangements for the purposes for which it is designed. Next year they hope to see their hospital building under way.

We hear of the prospective organisation of other medical colleges within our school, which we trust will remain only in perspective. We have schools enough, and these need to be better supported than they are. Better clinical facilities is the cry from nearly all of them.

The last meeting of the American Medical Association failed to pour oil on the troubled waters, and the success of the coming

international meeting seems less assured than ever.

The leavening goes on among the individual members of the profession. Among them you will occasionally hear the acknowledgment that it was a wrong move to expel and ostracise the early homeopaths—that their societies ought to have been large enough to hold them all. But in the minds of the men of that day they evidently were not. With all this the Society of Philadelphia has declined to open its association to women.

What will be thought of their professional liberality a few years hence? We believe the Massachusetts Society is not far behind

in the same illiberal and narrow-minded policy.

We enjoyed reading the letters of Dr. Dudgeon in your late issue of the World, and hope to see them in form for distribution, for they present the various questions most clearly, and should make valuable campaign circulars for the laity.

July 10th, 1886. T. M. S.

## Obituary.

#### GEORGE DUNN, M.D., J.P.

WE regret to have to announce the death of Dr. Dunn, one of the earliest of English homoeopathic practitioners, and one of the bravest. Dr. Dunn died at Hastings, in New Zealand, on May 8th, at the age of eighty-two, having been born at Barnaley in 1804.

On leaving school Dunn was apprenticed to a general medical practitioner in Chelsea; but after a year and a half of this he took to a seafaring life, and rapidly rose in rank till he became captain, and made many voyages. In 1828 he married, and resumed his medical studies at Edinburgh, London, and Paris, eventually settling at Doncaster. It was after he had been in practice some years that he became acquainted with homeopathy. On giving it a trial he was astounded at the results he obtained, and determined to embrace the system. For some time the carrying out of this resolution entailed a severe pecuniary loss; but Dunn was not the man to give way before this, and in the end his practice largely increased. The story of the founding of St. James's Hospital is part of the history of homoeopathy in Great Britain; Dunn overcame all obstacles, and proved his ability to work the hospital single-handed in face of the leagued opposition of all other medical men in the town. After 1866, when he met with a severe accident, Dr. Dunn's health failed somewhat, and ten years later he retired from practice. continued, however, to work whenever his health permitted, and took locum tenens work, making voyages in the intervals.

A man of indomitable energy and pluck, as well as an accomplished surgeon and physician, George Dunn was ever full of spirits and geniality, which did not forsake him up to the day of his death. Again and again he rallied from illnesses which threatened to be fatal. He died quietly and painlessly from

heart failure.

## FROM ABROAD.

#### AMERICA.

#### MATERIA MEDICA OF HÆMORRHAGE.

By A. K. CRAWFORD, M.D., Professor of Physical Diagnosis.

Synopsis of a Lecture delivered before the class of Hahnemann Medical College.

Phosphorus.—Œdema following hæmorrhage.

Tartar Emst. — Hæmorrhage coming on suddenly; great dyspnœa.

Bell., Ferrum, Nux V., Sulphur. — Hæmorrhages following

passive congestion.

Arnica.—Hæmorrhages following over-exertion.

Bryonia.—Supplemental hæmorrhages.

Cactus.—Hæmorrhages with over-activity of the heart.

Digitalis.—Stasis of blood in heart.

Aconite.—Active hemorrhage, with great anxiety. I would advise that you give it in the third decimal, hypodermically, for frequently the mouth is filled with blood, or the stomach may be in such a condition as not to be able to absorb medicaments.

Millefolium.—Florid blood without anxiety.

Hamamelis.—Venous hæmorrhages.

Forrum Aceticum.—Hæmorrhages with cough.

Ipecac.—Hæmorrhages with nausea.—Medical Current, Feb., 1886.

## MAMMARY CARCINOMA; TO OPERATE OR NOT TO OPERATE.

"In a small number of cases, statistics would indicate that life is prolonged by operation for an average of eleven months."
—Satterthwaite.

"The subjects of cancer live longer when the policy of noninterference is followed than when the tumour is removed."—

Lemaitre.

"The extirpation of a tumour of undoubted cancerous nature

should never be undertaken."—Boyer.

"The surgeon should consent to operate only upon the urgent solicitation of the patient, and after she has been told of the probable recurrence of the disease."—Morris.

"An operation is justifiable only at the very incipiency of the

trouble."—Velpeau.

"The advisability of amputation of the breast is doubtful."—
Verneuil.—"S." in Medical Current, Feb., 1886.

## GENERAL CORRESPONDENCE.

#### EPILEPSY.—COLLECTIVE INVESTIGATION WANTED.

To the Editor of the Homeopathic World.

DEAR SIR,—I am studying since some years the pathology and the therapia of epilepsy. I am quite sure that our homeopathic treatment will and must be the most efficient if only we could better discern the value of the single symptoms of the aura, and if we knew better the abortive attacks, viz., if we did not undertake to heal "epilepsy," but if we would individualise just as in every other illness. I believe firmly that the great task to fix the efficient therapia of the different forms of epilepsy (grand mal, petit mal, epileptic vertigo and sweat, enuresis spastica) can only be fulfilled by the collaboration of all who take an interest in our system.

1st. It is necessary to make a systematical investigation of the whole nervous system on every patient labouring under

epileptic attacks.

2nd. It is necessary to collect the notes about all known attacks of epilepsy, which have been treated with good or bad effect.

This side of the question requires the collaboration of every

practitioner, graduated and not graduated.

I will be thankful for every notice given to me on this object, and I also will accept with best thanks every directive notice about literature. It will be a pleasure for me to make the above-thought investigation of the nervous system on patients from your country, residing or travelling on the continent.

May I ask you the favour to give my address and a note about my intentions in your paper? and allow me to thank you

for all you will do.

Truly yours,

ALEXANDER VILLERS.

Geithain, near Leipsic, Saxony, Germany, 18th July, 1886.

# MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Abstracts of some of the Medical and Surgical Cases Treated at the General Hospital for Sick Children, Pendlebury, Manchester, during the Year 1886. Edited by H. Ashby, M.D.; H. B. Hutton, M.B.; and G. A. Wright, F.B.C.S.

Roy. 8vo, ad., pp. 178. (Cornish. Manchester. 2s.)

Barnes (F.). A Manual of Midwifery for Midwives. With Illustrations. 3rd ed. Post svo, pp. 192. (Smith, Elder, and Co. 6s.)

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Buzzard (T.). On some Forms of Paralysis from Peripheral Neuritis of Gouty, Alcoholic, Diphtheritic, and other Origin. The Harveian Lectures for 1885. Post 8vo, pp. 156. (Churchill. 5s.)
Corning (J. L.). Local Anesthesia in General Medicine and Surgery; being the Practical Application of the Author's Recent Discoveries in Local Anesthesia. 8vo, pp. 99. (New York. 6s. 6d.)
East (E.). The Private Treatment of the Insane as Single Patients. Post 8vo, pp. 68. (Churchill. 2s. 6d.)
Freyer (F. J.). The Modern Treatment of Stone in the Bladder by Litholapaxy: a Description of the Operation and Instruments. With Cases Illustrative of the Difficulties and Complications met with. 8vo, pp. 114. (Churchill. 5s.)
Helm (G. F.). Short Sight, Long Sight, and Astigmatism: an Elementary Guide to the Refrection of the Eye. Post 8vo,

and Assignation of the Eye. Post 8vo, pp. 102. (Churchill. 3s. 6d.)
Kucher (J.). Puerperal Convalescence and the Diseases of the Puerperal Period. Cr. 8vo, pp. 311. (New York.

7s. 6d.)
Landols (L.). A Text-Book of Human Physiology. Translated from the Fifth German Edition, with Additions by William Stirling. With very numerous Illustrations. 2nd edition. 2 vols. Roy. 8vo, pp. 1,310. (Griffin. 42s.)
Landolt (E.). The Refraction and Accommodation of the Eye and their Anomalies. Translated by C. M. Culver. With 147 Illustrations. 8vo, pp. 610. (Pentland, Edinourgh. Simpkin. 30s.)
Meadows (A.). The Prescriber's Companion. 5th edition. With the Ad-

dition of New Remedies up to the Present Date, including those of the British Pharmacopeia of 1885. 32mo, pp. 290. (Renshaw. 3s. 6d.)

Oswald (F. L.). Household Remedies for the Prevalent Disorders of the Human Organism. 12mo, pp. 229. (New York.

Pye (W.). Elementary Bandaging and Surgical Dressing; with Directions concerning the Immediate Treatment of Cases of Emergency, for the Use of Dressers and Nurses. 32mo, pp. 178. (Wright, Bristol. Trübner. 2s.)

Pye (W.). Surgical Handicraft. 2nd. ed. Post 8vo, pp. 540. (Wright, Bristol. Trübner. 10s. 6d.)

Sharkey (Seymour J.). Spaam in Chronic Nerve Disease: being the Gladstonian Lectures delivered at the Royal College of Physicians of London, March, 1886. 8vo, pp. 100. (Churchill. 5s.)

Tait (L.). Diseases of Women. 2nd ed., thoroughly revised and enlarged, spe-cially prepared for "Wood's Library." Roy. 8vo, pp. 192. (Cornish, Birming-ham. Simpkin. 10s.)

Thin (G.). On Cancerous Affections of the Skin: a Treatise on Epithelioma and Rodent Ulcer. Svo, pp.

(Churchill. 5s.)
Thompson (Henry). The Diseases of the Prostate, their Pathology and Treatment. 6th ed. 8vo, pp. 236. (Churchill.

Watts (R. G.). Diseases of the Throat, Air Passages, and Lungs. 20th edition. revised and enlarged. 8vo, sd., pp. 92. (Simpkin. 1s.)

## SHORT NOTES, ANSWERS TO CORRESPONDENTS, ETC..

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester Road, South Kensington, S.W.

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be present issue.

sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

Dr. S. KENNEDY. -- We greatly regret that, owing to the lateness of our return to town, and press of work, we were unable to make the use suggested of the valuable note so kindly forwarded to us. We have utilised it in our

Dr. Thomas, Llandudno.—In our opinion "the other side" of the Pasteur inoculation question is ventilated sufficiently everywhere—in the orthodox medical press and in the public newspapers. We shall be happy to insert any letter you may send us on the question containing your own views. We should be glad to insert Dr. C. Drysdale's letter if we had room also for the very effective replies that it has called forth.

Dr. Harmar Smith requests us to state that he has removed from Buckhurst Hill to Guildford, where he succeeds Dr. Bradshaw in practice. Bradshaw has come to reside in London. His address will Holland be in future 122, Road, Kensington. We are glad to have Dr. Bradshaw in the metropolis, and hope to have the pleasure of seeing him at the meetings of the British Homeopathic Society.

#### CORRESPONDENTS.

Communications received from Dr. Samuel Kennedy, London; Dr. Dudgeon, London; Mr. G. A. Cross, London; Dr. Bartlett, Philadelphia; Dr. Wilder, New York; Dr. T. M. Strong, New York; Dr. Sutherland, Boston, U.S.A.; Dr. Harmar Smith, Guildford; Dr. Alexander Villers, Geithain, near Leipsic; Dr. Carl Copenhagen; Pope, Tunbridge Wells; Dr. Hughes, Brighton; Dr. Thomas, Llandudno; Dr. Dyce Browne, London; Dr. Drury, Bournemouth; Mr.J. Hoskin, Cornwall

## BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische Zeitung.—Zoophilist. — Medical Advance.—Monthly Homœopathic Review. — Revue Homeopathique Belge.—Homöopatische Monatsblätter.-New York Medical Times.-Homocopathist .-American St. Louis Periscope.—Medical Current. — Clinique. — Medi-Visitor.—Chemist Guide. Druggist. — The Hahnemannian Monthly.— Bibliothèque Homœopathique. -Medical Era. - Medical Annals.—California Homocopath. -The Clinical Review.-Homœopathic Physician.—North American Journal of Homeopathy.—Homoeopathic Recorder.—Medical Counselor.— L'Art Medical.— St. Louis Medical Journal.—Medical Investigator. - Albany Medical Annals.—Homosopathic Journal of Obstetrics. — Clinical Review.—Southern Journal of Homeopathy.—The Builder. -Medical Advocate.-Practical Christian.—Maanedsskrift for Homeopathi (the complete set, by favour of the editor, Dr. Carl Hansen). — Report British Homocopathic Hospiand Dispensary.—Notes and Extracts of Letters written during the Earthquakes in Spain.—Proceedings of July, Third Annual Meeting of American Institute of Homogonathy (advance proof by favour of Dr. Bartlett).-Clarence Bournemouth Visitors' Directory. Digitized by Google



#### THE

# HOMŒOPATHIC WORLD.

OCTOBER 1, 1886.

# A NEW DEPARTURE IN THE ART OF REVIEWING.

It is not often that we enjoy the privilege of reading a review of his own work by an author. Hitherto a feeling of delicacy or modesty has generally stood in the way and restrained the author from telling us exactly what he thinks about his own book. And yet, when we come to consider the matter, who could possibly know more about the contents and be able to appreciate them better than the writer? As regards other manufactured goods, their makers are not generally so mealy-mouthed, and we accordingly see the makers of soap, or mustard, or pianos, or pills vaunting their wares as the most excellent of their kind, and exhausting the vocabulary of praise in recommending them to the public. It is perhaps a false delicacy that prevents literary men doing the like. At all events the editors of the Practitioner have no nonsense of this sort about them. Two of them. Dr. LAUDER BRUNTON and Dr. J. MITCHELL BRUCE, have written books, and in the September number of the periodical they edit they favour us with notices of these books written in a strain of highflown eulogy, which reminds us strongly of the laudations bestowed on their goods by the makers of the articles alluded to above. Thus Dr. Brunton says of his new book, Disorders of Digestion: "We have no doubt that the profession will show in a practical way that they are glad of an opportunity of possessing the volume;" in other words, he hopes they will buy his book. "Readers

of the Practitioner will not expect us to dilate on the scientific and literary qualities of its contents, and we therefore feel that it is hardly necessary to give at length the high estimate we have formed of this book." Authors hitherta have allowed others to judge of the scientific and literary qualities of their work, and to form their own estimate of it, but it must greatly lighten the labours of independent reviewers to have the author's assurance of its scientific and literary value, and to find that the person who knows it best has formed a high estimate of it. "Except BRILLAT SAVARIN . . . . we can call to mind no author who has discussed the question of dietetics at once so pleasantly and philosophically." The name of BRILLAT SAVARIN, the great authority on the culinary art, would naturally occur to the author while engaged in cooking this bogus review; but we don't think even BRILLAT SAVARIN could have equalled the author in the matter of sauce. "The book, in short, epitomises much of what modern medicine owes to Dr. Brunton; and we believe that few will read it without having their views usefully enlarged." There is no doubt that "modern medicine" owes much to Dr. BRUNTON for his intrepedity in despoiling the homeopathists of so much of their peculiar therapeutics and boldly conveying it to his own camp. No doubt indeed that the readers will have their views usefully enlarged, for even the review opens out an immense vista of possibilities. If the example of Dr. Brunton is generally followed, it will doubtless hereafter be the established thing for authors to review their own books. and the time may come when no review of a book will be thought anything of unless certified to have been written by the author at so much per page. That happy time has not yet come, but to Dr. BRUNTON must be ascribed the merit of being the precursor of its advent.

Dr. MITCHELL BRUCE is not a bit behind Dr. BRUNTON in the modest assurance with which he reviews his work on Materia Medica and Therapeutics. He tells us that the work he has undertaken "has been accomplished with thoroughness and ability." It has been "written by one imbued

with the spirit of medical progress." That expression in the Brunton sense would imply that the author has largely culled from the homeopathic therapeutics, but what it means in Dr. Bruce's sense we do not know. He says that while he "has largely broken away from the simple faith which mainly guided our ancestors in the use of drugs, he by no means disregards all the valuable experience of the past, and rightly treasures those grains of corn which have been sifted from the husks of empiricism, and which any man of sound judgment is unwilling to exchange for some of the enthusiastic dogmas which have been rashly founded on an imperfect appreciation of the physiology of the frog." Dr. Bruce has only recently been added to the editorial staff of the Practitioner, but this extract shows what a valuable acquisition he is. This is what our American friends would call "high-toned" writing, or perhaps "high falutin'." "Sifting the grains of corn from the husks of empiricism" is "good," as Polonius would say, but "enthusiastic dogmas" is better still, and nothing could possibly be better than "enthusiastic dogmas rashly founded on an imperfect appreciation of the physiology of the frog." Evidently Dr. BRUCE is a master of style. "Le style c'est l'homme," and we can see from this what a master of men Dr. Bruck must That we do not underbe to be able to write as he does. stand what he means does not detract an atom from our admiration of the remarkable passage we have quoted. "We have a book which is not only abreast of the times, but is a sound and safe guide for those who are engaged in the important work of managing and treating the sick." This is encouraging, and it is to be hoped that "those who are engaged in the important work of managing and treating the sick" (which is an expansive way of saying "medical practitioners") will be able to bring their patients safe and sound out of their diseases under the guidance of this "abreast-of-the-times" book.

We were at first disposed to think that the editors, being from the other side of the Tweed, were acting on the familiar Scotch maxim of "claw me and I will claw thee," and writing

reviews of one another's books, but further consideration showed that this could not be the case. We discovered that Dr. Brunton's reviewer was Dr. Brunton himself, in the same way that Dugald Dalgerry discovered the disguised MACALLUM MORE: and it was evident that Dr. Brunton could not have written the review of Dr. Bruce's work, for he never would have talked so disrespectfully of the "physiology of the frog; " for, as our readers know, Dr. BRUNTON is the high priest, or we may say the chief augur, of frog physiology. But even if they had written one another's reviews, that would hardly have altered the strangeness of the affair, for hitherto the solidarity of co-editors has been generally recognised and acted on, so that a commendatory review of a work would not appear in a periodical of which its author was an editor. If any one should—in the face of the facts-still doubt the possibility of Dr. BRUNTON writing a laudatory notice of his own work in his own periodical, we may remind him that Dr. BRUNTON has done more unconventional things than that. He has actually copied into his book on Materia Medica a large number of remedies and their indications from the works of writers on homeopathy without the slightest acknowledgment or hint as to their source. An author who could act thus may easily be credited with the smaller literary offence of puffing his. own work in his own periodical.

## NOTES.

### THE INTERNATIONAL CONVENTION.

In our present number we complete the record of the proceedings of the Convention at Bâle. In consequence of the large amount of our space devoted to this report we have been obliged to hold over much valuable matter kindly forwarded by our contributors, who will, we are sure, understand the necessity for the delay. We publish also in the present number an open letter from Dr. Dudgeon to Dr. Lorbacher, which we trust will have the effect of arousing.

our German colleagues from the lethargy that has come upon them to take their proper position in the work of advancing therapeutics, and will prevent them from ever again repeating their recent actions.

# Annual Meeting of the Homosopathic Central Society of Germany.

In some respects the Central Society received similar treatment to that given to the International Convention. They had elected at last year's meeting Munich as the trysting-place for this year, but the Bavarians acted towards them as the Belgians did to the International, and would have nothing to do with them. Like the International, they had to choose another place of meeting, and they selected Frankfort-on-the-Main, where they held their annual congress on the 9th and 10th of August. Twenty-four doctors, four apothecaries, and the non-medical editor of the Monatsblätter attended. Dr. Lorbacher, editor of the Allg. Hom. Zeitung, presided. The evening meeting of the 9th was occupied with what may be called the private business—the financial affairs of the Leipzic Dispensary, the appointment of a tribunal of honour to settle a personal dispute between a doctor and an apothecary, the election of new members, the appointment of a librarian, the determination of Leipzic as the place of meeting for next year, the voting of a sum to assist poor students, and a vote of censure upon certain members for unprofessional conduct in advertising and dealing in secret remedies. At the meeting of the 10th, as no papers had been sent in, the business was limited to some desultory talk about the Pionier, commenced by Dr. Weber, from which it appears that this periodical is not in a very flourishing state as regards subscribers, is of no advantage to "us," and is regarded by some as a mere vehicle of puffing advertisements. Next the meeting proceeded to consider Peczely's Eye Diagnosis, which seems not to have met with general approval. The only other subject brought before the meeting was the employment of antiseptic dressings for surgical cases. The treatment of diphtheria was announced for discussion, but was abandoned on account of the heat of the weather! Then the members with their wives and some guests dined together, and after dinner dispersed to their respective homes. The reporter in the Alla. Hom. Zeitung says: "The remembrance of the Frankfort meeting, we are convinced, will be an agreeable one for all who took part in it. We hope that it will induce many to come next year to Leipzic." All we can say is that the German representatives of homeopathy must be easily pleased, for we are unable to see what was done at this congress to advance homeopathy in any way. And it was in order not to interfere with the assemblage of these two dozen gasping doctors, who, when they did assemble, found they had nothing of the slightest interest or importance to talk about, that Drs. Weber and Lorbacher did their level best to wreck the International Convention, which, however, in spite of their hostility, accomplished some useful work; whereas the German Society, after maundering about some subjects only remotely connected with homeopathy. were so exhausted that they had not sufficient energy to discuss the only subject that might have been of some use to homeopathy.

### DEATH OF THE EDITOR OF THE "LANCET."

DR. JAMES G. WAKLEY, proprietor and editor of the Lancet, and son of the founder of that journal, the late Dr. Thomas Wakley, died at Chertsey on the 30th of August, of cancer of the tongue, in the 61st year of his age. Dr. Wakley will be best remembered from his connection with the Hospital Sunday and Saturday Funds, which he did much to inaugurate, and to which he has lately made very generous contributions. As an editor he fairly represented the rank and file of the profession, but it cannot be said he did much to raise either their level or their tone. The prejudices of the average medical man were always upheld, and the unfairness of the Lancet to those in disfavour has passed into a by-word.

### HOMEOPATHY v. ALLOPATHY IN ASYLUMS.

Dr. OSCAR LESEURE has been so kind as to send us from Lucerne, where he has been spending part of his holiday, the following most interesting note and statistics, which we are sure our readers will not fail to appreciate:—

"Several hours have been spent very pleasantly and profitably in studying the August number of the *Homocopathic World*. While reading the interesting correspondence from the *English Mechanic*, and especially Dr. Pope's statistics, it occurred to me that you might

be interested in the enclosed points, if you have not already seen them. They were very kindly given me by Dr. Alonzo P. Williamson, first assistant to the Middletown (New York) Asylum. I had intended reading them at the Convention at Bâle, but there seemed no desirable opportunity. In justice to the Middletown Asylum we ought to say that they receive all applicants. Thus, in a total of 175, we find that 46 patients who had been insane from two to forty years each were admitted during the past year (1885); seven cases were moribund when received. Yet in spite of these facts, of the whole number discharged over 45 per cent. were recovered, while the death rate was but a trifle over 5 per cent. on the whole number treated."

THREE OLD SCHOOL ASYLUMS.

Year.		Whole . treate		mber Deaths.	of of	ercentag deaths hole No treated.	on.	Numbe ischarg	r d	Numbe ischarg ecovere	red r	ercentage of ecoveries of whole No. discharged.
1883		2017		131		6.49	·	776		240		30.94
1884		2187		148		6.76		872	•••	242		27.75
1885		2251		117		5.20	•••	920		247		26.84
OLD SCHOOL ASYLUMS FOR THREE YEARS.												
		6455				6:13		2568		729		28:38
	•••	0499	•••	980	•••	0.19	•••	2000	•••	129	•••	20 90
STATE HOMOEOPATHIC ASYLUM FOR THREE YEARS.												
	•••	1319	•••	66	•••	5.00		422		203		48.10
(Analysis.)												
UTIOA, N.Y.												
						•				100		04:10
1883	•••	982	••	57	•••	5.81	•••	378	•••	129	•••	84.12
1884	•••	991	•••	56	•••	5.65	•••	384	• • • •	89	•••	23.18
1885	•••	999	•••	40	•••	4.00	•••	430	• • •	122	•••	28.37
Buffalo, N.Y.												
1883		539		45		8.35		210		65		30.95
1884		604	•••	43	•••	7.11	•••	257		80		31.12
1885	•••	642	•••	30	•••	4.67	•••	271		77	•••	28.41
1000	•••	012	•••	-					•••	• • •	•••	20 11
Poughkeepsie, N.Y.												
1883		496		29		5.84		188		46		24.46
1884	•••	592		49		8.28	•••	231		73	•••	31.60
1885		610		47		7.70		219		48	•••	21.91
2000	•••	010									•••	
			M	IIDDL	ETOW	7N, N.	Y. (	(Hom.)	).			
1883		410		18		4.39		150		69		46.00
1884	•••	423		21		4.96		141		68	•••	48.22
1885	•••	486		27	•••	5.22		131	•••	66	•••	50.38
1000	•••	300	•••	۵,	•••	5 55	•••	101	•••	00	•••	20 00

Ward's Island Homosopathic Hospital — "Hospital"
OR "Infirmary"?

In reference to the statistics of the Ward's Island Hospital published in our last issue, Dr. Pope kindly sends us some interesting additional particulars. He points out that "Ward's Island Hospital is not a hospital in the same sense as St. Bartholomew's or the London Homceopathic is a hospital, but is simply what we understand by a workhouse infirmary. These statistics must therefore be compared with the Marylebone Infirmary or some such place, and not with an ordinary hospital in the English Indeed it is not a 'hospital,' but an 'infirmary;' consequently numbers of cases get in there which a hospital would not receive, and their mortality is proportionately greater. This distinction I have long recognised, but during the last year it has been forcibly presented to me by the fact that in Tunbridge Wells the board of management have been obliged to change the title of the Infirmary to that of 'Hospital.' The place used to be called 'Tunbridge Wells Infirmary,' now it is 'Tunbridge Wells General Hospital,' and the change was adopted because nurses leaving and having certificates from the 'Tunbridge Wells Infirmary' found a difficulty in getting situations, the people they applied to thinking they had come from a workhouse infirmary. The mortality in the one is always necessarily far larger than in the other."

# THE HOMOEOPATHIC PHARMACEUTICAL Association of Great Britain.

THE annual meeting of this Association was held on Tuesday evening, August 24th, 1886, at Cheltenham. There was a good attendance of pharmacists. The annual report of the council was adopted, and the office-bearers for the session of 1886-7 were elected. The president, Mr. J. C. Pottage, of Edinburgh, then delivered an address on "The Past, Present, and Future Position of Pharmacy," dwelling in the latter part of his address upon the immediate desirability of the pharmacists of this country taking conjoint action to secure their rights and protect their interests by obtaining the introduction of a clause into the Pharmacy Act making it unlawful for any but registered chemists to sell articles of a remedial nature. The address was listened to with close attention, and at its close an animated discussion took place, after which a committee was formed for the purpose of carrying out the suggestions of the address. A hearty vote of thanks was accorded the chairman. We are glad to find in the President's address, which we hope to publish shortly, a sympathetic allusion to the Homeopathic League.

#### CAUTION.

Those who employ Allen's Materia Medica should observe that in the pathogenesis of Carbo Vegetabilis contained in his tenth volume, the authorities 16 to 25 are persons who took black powders of saccharum lactis, and it is by a grave inadvertence that their symptoms are mingled with those of the actual provers of the drug.

R. H.

#### SCHOOL OF HOMEOPATHY-HAHNEMANN ADDRESS.

DR. JOHN H. CLARKE has been chosen to deliver the Hahnemann Address for the present year. The subject will be The Revolution in Medicine. It will be delivered at the London Homeopathic Hospital on the afternoon of Tuesday, October 5th, at 5 p.m. Dr. Asa S. Couch, of Fredonia, N.Y., who was invited to deliver the address, did not find himself in a position to accept the invitation.

## ORIGINAL COMMUNICATIONS.

## THE NEW VOLCANO IN NEW ZEALAND.

By J. MURRAY MOORE, M.D.

It may interest the readers of the Homeopathic World who have read my previous articles on the Hot Springs and Baths of the North Island of this colony (see Vol. XVI., June and July, 1881, and Vol. XVII., May, 1882) if I describe some of the features and results of the most extraordinary convulsion of nature that has ever occurred in the history of Maori-land—namely, the bursting out of the new volcano of Mount Tarawera.

While it is agreed by geologists that the three islands forming this colony have all been upheaved from the bed of the ocean, or alternately upheaved and depressed, by submarine volcanic action, the only external signs of volcanic origin upon the face of the country are to be found in the lava and pumice tracts, and the extinct craters of the North Island, the highest of which are—Ruapehu, 9,800 feet; Mount Egmont, 8,000 feet; Ngaruahoe, 7,500 feet; and Tongariro, 7,800 feet; and also, perhaps, in the very numerous geysers, fumaroles, solfataras, and hot springs in the

central plateau of Lake Taupo, including Rotomahana and Rotorua. Earthquakes are also frequent in Wellington, Nelson, Wanganui, and Taupo. All these are signs, according to scientific men, of subterranean plutonic energy. It is stated, moreover, by travellers like Kerry Nichols, who have penetrated into the wild "King country," that Ngaruahoe's crater is always steaming, and sometimes ejecting stones and sulphur. If a lava eruption had occurred from this mountain, therefore, no such great shock would have been given to us. But the new volcano arose on the night between the 9th and 10th of June, 1886, in a mountain with a table top, surmounted by three peaks, none of them extinct craters (Ruawahia, Wahanga, and Tarawera by name), situated on the south-east corner of Lake Tarawera, and sloping down to Lake Rotomahana, on the very side where

the far-famed White Terrace has developed. The inhabitants of Auckland, Napier, Tauranga, and many other towns of lesser size, were roused at 2.30 a.m. on the morning of 10th June by two loud explosions, the cause of which was ascribed in Auckland to the firing of signal guns. at sea by some vessel in distress. But telegrams from Ohinemutu on Lake Rotorua, the nearest telegraph station to Tarawera, soon revealed their nature. That night had proved a terrible one indeed to both natives and settlers, the loss of life amounting to 111-9 of European and 102 of native race. The native villages of Maira and Te Ariki were overwhelmed under thirty feet of mud, and the White settlement of Te Wairoa, the tourists' starting-place for the Terraces, was utterly destroyed by a bombardment of redhot stones, mud, and dust. Mr. Charles Haszard and four children were killed in their own home, Mr. E. A. Bainbridge, of Newcastle-on-Tyne, was crushed by a falling verandah in Macrae's Hotel, and about fourteen Maoris were suffocated in their huts by the mud-showers. The scenes of Pompeii and Herculaneum, mutatis mutandis, were once more enacted. At first a dense black cloud of smoke rose from the mountain, round which the most intense and varied lightning coruscated. Then flames shot up to an immense height, with stones propelled with such velocity that they fell to earth with the force almost of meteorites, and destroyed all the trees for miles round. Then steam and fine dust, which rose into the air more than eight and a half miles, drifted about on the currents of wind, and either fell in showers of mud within an area of 168 square miles from

the scene of eruption, or fell in dry powder over a wider expanse of country-amounting, in fact, to the enormous area of 5,700 square miles. The glare of the flames was visible at Helensville, 200 miles north, and at Christchurch, 600 miles south. The immediate effect of the dust deposit. was to kill hundreds of cattle and sheep by suddenly covering up their pasture to the depth of several inches, and to ruin the settlers who were dependent on the sale of grazing stock and of dairy produce all along the east coast. since then liberal subscriptions from Auckland, Wellington, Napier, and other places, with donations of hay, clothes, grass-seed, etc., have relieved their most urgent wants, and the rains of winter, by washing the finer particles of the dust and mud into the soil, will fertilise the land in time for the green crops of next spring.

But the saddest loss to our country, next to the loss of valuable lives, is the destruction of the White and Pink Terraces of siliceous strata, described in my article of July, 1881, which have sunk down into the lake they once adorned, and are gone for ever. Lake Rotomahana (Maori for "hot lake") itself is now a furiously-boiling geyser, with two craters at its margin, continually ejecting steam, smoke, and stones. In a line trending south-west from the immense chasm in the side of Mount Tarawera, blown out by the force of the eruption, there have formed no less than twelve craters, extending down to the Lake Okaro, where not even a hot spring had been known to exist before.

Roads are now being made to the new volcano, and communication has been restored between villages hitherto shut off from the world by avalanches of mud. Dr. Hector, the head of the Government Geological Department, was sent up to the scene as soon as practicable, and ordered To Wairoa to be finally abandoned as a settlement. presented a concise report on the eruption and its results. Two other scientific gentlemen, representing the Auckland Institute-Mr. J. A. Pond, Colonial Analyst and homeopathic chemist, of this city, and Mr. S. Percy Smith, Chief Surveyor-also carefully explored, with much intrepidity, all the region of the outbreak. Their theory of the causes, both predisposing and immediate, of the eruption, is so ingenious and plausible, that I will condense it for the information of the readers of the World.

For many centuries the acidic rocks beneath and around Lake Rotomahana have been eroded and honeycombed by

the steam and acidulous hot water coming up from the numerous springs below, the palpable evidence of which has been the formation of the Pink and White Terraces, and of several other half-built terraces round the lake. It has been calculated that not less than 400 tons of solid matter in solution has been washed down out of Lake Rotomahana by the Kaiwaka Creek into Lake Tarawera. Now when, on the night of June 9th, a slow earth-wave was produced, along with an unusually high tide, by the combined attraction of the moon and Mars (which was occulted that night), the base of Mount Tarawera, agitated by an earthquake, gave way on the Rotomahana side, sinking into the weakened and honeycombed rocks. The waters of the lake, rushing into the rift thus made, caused a tremendous explosion of superheated steam, which actually blew out, as if by dynamite, part of the side of Mount Tarawera. The sudden bursting of the overlying rock was followed by the ejectment of volcanic matter, which had been molten, but dormant, at some distance beneath its base.

The consequences anticipated by these observers are the formation of a series of intermittent geysers in and near Lakes Rotomahana, Rotomakiriri, and Okaro, grander than any hitherto found in New Zealand, and a temporary lessening of the temperature of the hot springs at Ohinemutu.

One other result may be assumed with some degree of confidence—namely, that these new and very effectual vents for plutonic energy will be a safeguard against any renewal of action on the part of the sixty-three extinct craters which exist within ten miles of Auckland.

As a new mineral spring resort named Te Aroha has spring up since the date of my last contribution on such matters, I will offer a short paper on the place next month.

Auckland, New Zealand, July 26th, 1886.

# A CASE OF HYDROCELE CURED BY SILICA 3x AND 12.

[Through the kindness of a correspondent, Mr. Samuel Drummond, of Bradford, we are enabled to publish this interesting case.—Ed. H. W.]

#### Mr. Drummond writes:-

<sup>&</sup>quot;I have often been asked to send to you the case of a gentleman, a friend of mine, who for ten years or more was troubled with

hydrocele. He consulted Sir Spencer Wells and Sir John Erichsen, and they both told him there was no cure, but that he would have to be operated on once or twice every year, which he was for many years. I gave him Silica 3x and 12, to be taken alternately, each dilution for a fortnight, and after taking them for a while to have a week or two without medicine, and to take more of 12 than 3x. The medicine was continued for about a year. I believe it is now three years since he took the medicine, and he has not been operated upon since. It is apparently a complete cure."

### INTERNATIONAL HOMŒOPATHIC CONVENTION, 1886, BÂLE, SWITZERLAND.

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(Report continued from p. 425.)

THERAPEUTICS AND SECTIONAL MEETINGS.

THIRD DAY .- Thursday Morning, August 5th.

THERAPEUTICS.

I.

Dr. D. HANSEN, of Copenhagen, on

Sepia, and its Importance as a Remedy in Pulmonary Affections.

Dr. Hansen referred especially to three patients, all ladies. In cases which indicate Sepia there is chronic induration of the lungs sympathetic with uterine affection. In all three cases the patients had had children, one a large family. In all there was infiltration about the apex. It is not enough to prescribe according to pathology, but the symptoms must be studied carefully. Stitches in upper part of the lungs under the clavicle, going along to the third rib, is a characteristic symptom. Dr. Heermann mentioned this to Dr. Hansen. Dr. Hale, of Chicago, had confirmed it. Another characteristic is hæmoptysis, which disappears on beginning to walk. A sensation of emptiness is also an indication.

In the family of one of the patients there was a death from tuberculosis. All three recovered. There is another characteristic symptom, pain in the occiput. This is sympathetic with uterine affections. One of the patients suffered from ozena, another from psoriasis. Sepia did good generally, and cured all the affections, though other medicines and cod-liver oil had before been used in vain.

Dr. MEYHOFFEE added that one characteristic symptom was pain on the left side of forehead and eye, which is sympathetic with the uterus. It is one of the most interesting chapters in pathology. When ladies (whether married or single) coming of



parents of tubercular tendency are affected with diseases of the womb for a longer or shorter time, you may conclude that there will be affections of the lungs, and then, as Dr. Hansen has said, Sepia will be found one of the most effectual remedies; and remedies directed to the lungs themselves will fail to touch them. As to the particular pain on the third rib on the left side, this is corroborative, but only secondary in importance, and must not be insisted on. In chronic congestion of the lungs in ladies who suffer from leucorrheea or other uterine affections, Sepia is one of the most efficient medicines. Dr. Meyhoffer generally used the second and third decimal tinctures.

Dr. Mossa mentioned that an additional indication for Sopia is chronic peritonitis in ladies after gonorrhœa caught from their husbands. There is often congestion of the lungs as well, and

Sepia is better than Thuja.

Dr. Cowl confirmed Dr. Mossa's observation of leucorrhoea consequent on gonorrhoea in married women, and much more severe than in unmarried. In one case it was fatal. Sopia he had used with considerable benefit in a number of cases, but he had seen more good from Pulsatilla, and, where there was acridity, from Sabina. He trusted more to general treatment and consideration of general symptoms than to local treatment. He used glycerine on a cotton tampon. He thought the limited use of pessaries was good, but that the abuse of them had done immense harm.

Dr. Runnels had had good results from Sopia. He finds it more appropriate where reflex condition is present. Reference has been made to local applications. He would distinguish. It is not possible to cure all cases with Sopia or internal remedies alone. He had had cases of illness recurring and recurring until the local affection was attended to.

Dr. Shädler confirmed Dr. Hansen's remarks, and pointed out Hahnemann's intuition in indicating the place of *Sopia*, and also that it was from the effects of high dilutions that his symptoms

of this drug were observed.

Dr. Hughes could not quite agree with Dr. Shädler. Sepia was in the first edition of the Chronic Diseases, and the symptoms there were exclusively from patients taking dilutions from 3—12 mainly. There is good reason to suppose the medicines were generally given at this time in the 2nd and 3rd triturations. In the second edition 400 symptoms were added, and these were from the 30th, but three-fourths were from the stronger.

Dr. Hansen, in reply, said that the first introduction of *Sepia* in pulmonary affections was by Dr. Kunkel, of Kiel. Carroll Dunham pointed out that in the early provings no examination

of the uterus was made.



П.

Dr. Cooper, of London, on Ear Disease and Gout.

Dr. Cooper first read the following précis of his paper:-

Dr. Cooper believes that gout causes deafness by affecting the lining membrane of the aural vessels with chronic inflammation, and brings forward a new remedy for such a condition in the shape of the *Picrate of Iron (Ferrum Picricum)*. He relates the incidental pathogenetic effects of this salt which led him to think it homeopathically related to gout, and adds some clinical confirmations. He does not pretend that the drug is specific for gouty deafness, but that, given in the dilutions from 12-30, it will seldom fail to benefit. His only illustrations, however, are two cases, in neither of which is gout mentioned as a factor, and in the second of which the deafness is said to have been "climacteric." In one a distressing tinnitus disappeared under the 3x potency; in the other, deafness and headache under a solution of 1 to 50.

The paper ends with a description of the substantive changes sometimes induced in the ear by chronic gout. Either there is hypertrophy and stiffness with anemia, or there is eczema, with much tenderness and irritability. In the former case the deafness is said to be very intractable; in the latter it readily yields to Chinium Sulphuricum in the 6x-12x trituration.

Dr. Cooper remarked in addition that one of his objects was to put the meeting in possession of a knowledge of the use of Picrate of Iron. It has the singular property among iron salts of having a strong hepatic action. He did not wish to say much in regard to deafness. Last year he was engaged in a study of Vascular Deafness. There are three common forms of deafness described: (1) Obstructive, which is the only one really described by allopaths. When Dr. Cooper examined the cervical blood-vessels he found they all had bruits. (2) There is the nervous deafness, and (3) the one he had described, Vascular Deafness. These three may be singled out by Hahnemann's method. The first goes and comes suddenly; the second comes suddenly and may go away as suddenly. The third always comes on gradually, awing to an enfeeblement of the vascular system. Dr. Cooper has shewn in relation to noises in the head that there are two kindsthrobbing and musical; the former are produced by the condition of the arterial, the latter by that of the venous circulation. This form is curable, but takes a long time to cure. A slight degree of this deafness is very serious, but need not be in the other cases.

Dr. MEYHOFFER asked Dr. Cooper if there were no purely

nervous noises with vascular derangement.

Dr. Cooper said it was difficult to say, but he did not think a pure affection of the auditory nerve could of itself give rise to noises. Dr. Cooper's argument is that the auditory nerve cannot generate noises, but only register them. ("Hear, hear," from Dr. Hughes.)

Dr. Cowl asked Dr. Cooper if this kind of deafness was

easily discovered.

Dr. Clarke thought there was much credit due to Dr. Cooper for working out this subject; but did not think it fully settled at present. He had hoped to have heard more about gout, but he concluded that Dr. Cooper considered gouty affections to be of the vascular type. His experience did not always agree with Dr. Cooper's contention that nervous deafness always came on

suddenly.

Dr. Cooper said, in reply to Dr. Cowl, that the diagnosis of obstructive deafness was easy. Dr. Clarke's criticism was just and appropriate. The really typical nervous deafness comes on suddenly, and it never has the uniform progress of vascular deafness. It comes by leaps and bounds. It is more irregular. He mentioned a case. A lady, left alone in a house, had a fright. She became perfectly deaf, but recovered hearing when the fright had passed. There are many cases that might seem to upset his thesis. A clergyman came complaining of deafness of his left ear. He could hear four inches on the left side; and when proceeding to examine the right ear the patient objected, as he had been perfectly deaf on that side for twenty-five years. Dr. Cooper gave Picrate of Iron 3x, and in three weeks he heard perfectly well. He concluded there was gouty eczema in the meatus. He used the 3x, 6x, and 12x solutions in gouty The indications are—gouty dyspepsia, dirty tongue, constipation, biliousness, great weight on the chest, gouty lameness, and corns present on the feet. He noticed this last in a patient to whom he was giving it. He has given it in cases of painful corns with great effect, finding it better than anything else.

Dr. BATAULT asked Dr. Cooper if he did not think it would be better to divide nervous deafness into two forms—hysterical and sclerotic. He thought the case of deafness after fright was a hysterical case. The case of sclerotic could hardly be called

vascular.

#### III.

Dr. Boniface Schmitz, of Antwerp, on

La Psore Meningée Cérébrale, ou Les Meningites Psoriques.

Dr. Sohmitz referred to the following summary, and added a few remarks:—

Dr. Schmitz believes that a form of meningitis occurs which comes under the category of neither "simple" nor "tubercular," and he calls it "psoric." He differs from Hahnemann, however, in disclaiming any connection between psora and scabies; the former being with him an expression denoting "morbid states resulting from accumulation and retention in the blood of excrementations material of organic origin." They tend to issue in critical evacuations, and often spring up without any, or any sufficient, cause. If their origin can be traced, it is generally to a suppressed eruption or evacuation. A meningitis of this kind presents features leading one to think of the tubercular form; but they are not so severe, and under suitable homeopathic treatment this malady ends in recovery. The principal remedies are Belladonna, Agaricus, Apis, Aconite, Pulsatilla, Bryonia, and Sulphur.

Dr. Schmitz states that he has collected twenty cases illustrative of the malady; but on the present occasion he relates one only, in which the symptoms were sufficiently grave, but good recovery ensued under Aconite, Bryonia, Sulphur, and Agaricus, all in the 6th dilution; the last seeming to have the most decisive effect. He adds the case reported by Dr. J. G. Blackley in the Monthly Homcopathic Review for July, 1885, which he considers of this nature, and several others from homcopathic

literature.

Dr. Simon agreed with Dr. Schmitz on the psorie origin of many cases of meningitis. He gave psora a more general meaning than Hahnemann. He mentioned the case of a child, between eight and nine months old, suffering for a long time from eczema of the scalp. There was great itching, much secretion. Viola Tric. 6 and 12. The infant was cured rapidly, but became comatose at once, and remained drowsy all the day. He gave Opium and Sulphur, and the baby improved, and at the same time the eruption came back, but not so severe as before. After a month it was cured of both. The eczema did not completely disappear under the Viola. He did not dare give this remedy again.

Dr. Mossa asked if the cases were acute or chronic, and was

answered that they were acute.

Dr. Cash asked Dr. Schmitz if he did not find Calcarea and Silica of use in the acute meningitis. Dr. Schmitz said there was one case in his paper in which Calcarea was used in a high dilution.

Dr. Cash had come to look upon Calcarea in meningitis in rachitic subjects as one of the surest things in homocopathy. The 30th dilution he preferred.

Dr. Hughes asked if Dr. Cash spoke of inflammatory cases or chronic hydrocephalic cases. Dr. Cash said in the early stages of inflammatory cases and also in hydrocephalic.

Dr. Hughes spoke on the use of the term psoric. Dr. Simon would retain the term, and divide it into three classes—herpetism, arthritis or gout, and scrofula. Dr. Hughes thought it unfortunate to retain psora as the generic term, since it cannot be disengaged from scabies. The sooner we drop the name the better; while allowing for the insight of Hahnemann and the truth in his doctrine, we must admit that in this respect —its supposed relation to itch—the doctrine is ill-founded. Dr. Schmitz is to be congratulated on giving us a very useful classification of these cases. Are there any signs by which we may discover the hopeful cases? If we can from Dr. Schmitz gather which they are it will be a great gain.

Dr. Cooper frequently met with meningitis connected with ear diseases, especially in children in whom there are many tubercular indications. They generally recover. Two remedies he has had good results from, Kali Iod. 30 better than lower, and Torebinth in 3x and 12x. When there is diarrhose or mesenteric

affection Arsenic Iodide is the best.

As regards Psora, he had instituted an inquiry into the action of Sulphur, especially in West Indian fever. By looking at Hahnemann's Chronic Diseases in search of a remedy for this disease, he came on Sulphur, and used it with great success. He thought then that it was only by its relation to the symptoms; now he believed it had to do with the chronic dyscrasia indicated by Hahnemann's term. In Hahnemann's theory there are two diseases, those diseases connected with skin affections, and those connected with suppressed discharges.

Dr. Noble was glad Dr. Schmitz had drawn our attention to this form of meningitis; but he objected to the name "psoric." Dr. Schmitz's cases would all come under the herpetic variety. Dr. Noble had had two cases of eczema impetigo rapidly cured by *Hepar*, but in which meningitis came on, and with fatal

results.

Dr. Cowl believed there was a kind of meningitis distinct from tuberculous, and yet not simple. Regarding the term psors, he had been much opposed to it, but had inquired into the doctrine, and had found the term less objectionable than he at first thought. Psors was a wider term, and included in Hahnemann's day other skin affections besides itch, especially eczema which was attended with much itching. He thought the theory was well founded, and supported by the new discoveries respecting the tubercle bacillus. He said the itch insect was not known in Hahnemann's time.

Dr. Pore pointed out that Hahnemann was perfectly well acquainted with the itch insect, and published a pamphlet in which the acarus was accurately figured; but he believed that it was only in certain persons, in certain conditions of health, that the insect could produce the erruption; and it is this condition to

which Hahnemann attached so much importance.

Dr. Schmitz. (in reply) said that in using the term psora he did not mean to refer to the itch, and in future would prefer to call it "excrementitial."

Dr. MEYHOFFER said he would prefer to call the disease "diathesic," as "excrementitial" is too artificial a term.

#### IV.

A. MIDGLEY CASH, M.D., Torquay, England.

Report of a Case of Measles, followed by Diphtheria, and complicated with Whooping Cough. Post-Diphtheritic Paralysis. Recovery.

Dr. Cash thought he ought to apologise for his simple clinical paper. He would divide the case into two parts and speak of its complications. The throat symptoms pointed at first to scarlet fever, and the skin to measles. The throat was explained by the diphtheria, which seems to run parallel with the measles. Excessive prostration came on early, and paralysis affecting the heart, causing fits of syncope. The following is the epitome:—

Dr. Cash in this paper gives a detailed report of a case in which, after several weeks of whooping cough, measles supervened in a child living in a poor overcrowded neighbourhood of the town of Torquay. The cervical glands were greatly swollen. On the fifth day extensive diphtheria of an exceptionally adynamic type was developed. On the 12th day the soft palate was paralysed, the face cyanotic and syncope threatened. to this time the medicines chiefly relied upon had been Aconite, Kali Bich. 3x, Merc.-Biniod. 3x, Arsenic 3x, and Digitalis 1x, as the symptoms had indicated. She was now apparently sinking, any attempt to raise the head from the pillow was followed by The Cyanuret of Mercury was now given, in the 30th potency, for forty hours. After twenty-four hours she began to rally, and, in another day, was able to swallow milk and sit up in bed. China of and Gelson. were now given, and three days later, the whooping cough gradually increasing as the diphtheritic symptoms disappeared, Drosera 1x and Bellad. 2x were For a month food had been chiefly given by enemata, now she was able to swallow, and only one enema per diem was required, and in two or three days this became unnecessary. On the fortieth day feetid otorrheea was marked, and Pulsatilla and Causticum were given. This gradually passed away, and after a period of great weakness and much emaciation she made a complete recovery.

In some remarks on this case, Dr. Cash points out that the complication of rubeels with diphtheria rendered the diagnosis by no means simple at first, but that presently a typical picture of diphtheria was presented. The addition of whooping cough

greatly added to the danger from exhaustion. Dr. Cash also refers to the decline of the whooping cough during the time of the rubeoloid rash and its subsequent return. The post-diphtheritic paralysis occurred much earlier than it usually does. Dr. Cash further notices the threatened paralysis of the heart and the importance of insisting upon the horizontal position being maintained during convalescence. He also attributes the speedy recovery of cardiac power to the influence of the Cyanuret of Mercury. Causticum, he thinks, had more control over the paralysis than any other remedy. The completion of the recovery, ending in robust health without a trace of any nervous disease, shows, he thinks, how, even through the most formidable complications, nature may yet find her way to health aided by mild, unreducing, specific treatment.

Dr. MEYHOFFER asked about the diet.

Dr. Cash said for a week the patient was supported by nutritive enemata of beef-tea and milk, otherwise she had milk, beef-tea, and a little port wine.

Dr. Simon thought the Congress much indebted to Dr. Cash for bringing forward the case. The patient evidently had two

distinct diseases. The cure amply justified the treatment.

Dr. Nield endorsed Dr. Simon's expression of thanks. He wished to add his testimony to the value of Cyanide of Mercury, especially when there was much adynamia. The 3x trit. had done most for him. One case was interesting as being watched by an allopathist. It occurred in a child living at a considerable distance from Dr. Nield, who was called in when the allopathist had given the case up. The allopathic doctor sent reports to Dr. Nield after Dr. Nield's first visit, when they consulted together. Nield after Dr. Nield's first visit, when they consulted together. Merc.-Bin. was given at first. There was no improvement. The next morning the pulse was 120; respiration 80; temperature 105. He sent Merc.-Cyan., and in a very short time the child was convalescent. Some time after this the child had typhoid fever, and the allopathic doctor who was in attendance was very anxious to give the same medicine!

Dr. Pope thought one of the most satisfactory things in the case was the action of Merc.-Cyan. on the adynamia. It is difficult to know how long the danger from this may exist. He mentioned a case in which death occurred during convalescence, though there had been no symptoms of danger for ten days. It is necessary to keep convalescents from the disease much longer than they are disposed to be. Dr. Pope would use the Biniodide when the tonsils are large and the coating is slimy; the Cyanide when the membrane is leathery; Merc.-Iod. when there is much ulceration. The serpent poisons are of great importance for the adynamia.

Dr. Hobart also commended the paper as highly practical.

He was much pleased with the attention given to the food. One food found of great use in America is the expressed grape juice. Regarding the remedies, Lachesis in high dilutions is the one he has seen most valuable. Merc.-Cor. in certain seasons (i.e., in certain years, which cannot be specified) has been the best remedy for diphtheria. He has used a spray of the same remedy, one part to 4,000 or 5,000 of water, or of alcohol and water. In the latter case it is to keep the throat clean. The matter of rest, where there are symptoms of paralysis, is of the greatest importance, and he mentioned a case in point, in which lifting the child about contrary to his instructions led to fatal results.

Dr. Simon spoke of *Phosphorus* as a remedy for diphtheritic paralysis; also *Lachesis*, the characteristic symptom being when

the patient is suddenly wakened by suffocation.

Dr. Leseure said nourishment was to be prescribed in this disease like medicines. He thought (in opposition to Dr. Hobart) that the grape juice unfermented differed as a nutrient from wine. The question of the hybrid between measles and scarlatina has caused much confusion in the States, and he wished to know what was the experience in Europe.

Dr. RUNNELS mentioned the case of a child which he had diagnosed to be a case of what they called in America "Dutch measles," though the parents doubted his diagnosis. Within nine months it had most severe scarlatina, and six months later

it had genuine measles, thus confirming his diagnosis.

Dr. Hughes emphasised the great importance of the Cyanide of Morcury. It really reflects great credit on Dr. Beck, of Monthey in Switzerland, and Dr. Villers, late of St. Petersburg, now of Germany, who brought it forward in practice. Dr. Beck noticed the effect of the drug in producing diphtheritic conditions, and Dr. Villers put it into practice. Dr. Villers wrote an essay for the prize offered by the German Empress after the death of the Princess Alice; but it was not recognised, since it came from a homoeopathic source. This was a lamentable instance of allopathic bigotry. Another point was the evidence of its value in all dilutions.

Dr. MEYHOFFER answered Dr. Leseure in reference to the relation of rotheln to scarlatina and measles. On the Continent when measles prevails, whooping-cough, rotheln, and scarlatina always prevail at the same time, showing a relationship, if not

an identity, between the poison of each.

Dr. Cash (in reply) said he expected criticism for the irregular treatment of the case, but the case was irregular. The whooping-cough was a very serious element. It was often necessary to rouse the mother to a sense of the need to prolong her exertions. She became almost apathetic.

The President then adjourned the meeting till the afternoon.

#### V.

The following papers came before the afternoon Conventionafter the business proceedings reported on pp. 421-424:—

THEODORE KAFKA, M.D., Karlsbad, Austria, on

Diabetes Mellitus: Its Homocopathic and Balneo-Therapeutic Treatment.

The author commences with a summary of the views held as to the nature of diabetes in former and later times. For himself, he prefers to look for a true conception of the disease to itsetiology. As predisposing causes he dwells mainly on heredity, diet (the immoderate use of saccharine and farinaceous matters), and inactivity (leading to deficient oxidation). Among exciting causes he places in the first rank derangements of the nervous system resulting from strong emotional disturbance, though he does not attach so much importance as is often given to continued grief or worry. Trauma, alcoholic excess, and repeated chills are other starting-points of the malady, which he evidently regards as a general disorder of nutrition rather than as seated in any organ or definite nervous centre.

Proceeding to therapeutics, he surveys the German and French homocopathic literature for cases and recommendations, without any definite results. The older writers made no chemical examination of the urine, so that their diagnosis must remain uncertain. Among the later German practitioners, Arsenicum, Acidum Phosphoricum, and Kreasotum have acquired most repute,

while Uranium has done best in French hands.

The author's own experience is derived from an almost exclusive use of the Karlsbad waters, and he relates fifteen cases in which cures, more or less complete, seem to have resulted. He keeps his patients on an anti-diabetic diet, but allows a little Graham's bread.

Dr. Hansen referred to the use of Syzygyum Jambolanum, and wished to know if our American colleagues could give any

information.

Dr. Runnels confirmed the reports of its value.

Dr. Cown mentioned that there was an account of it in the Homospathic Recorder.

#### VI.

#### Dr. Ozanam's Papers.

Cases from Practice.

By Dr. Ch. Ozanam, Paris, France.

 Dr. Ozanam first treats of polypus occurring in the rectum and larynx. For those of fibrous or cancerous kind he urges operation as the only practicable course; but for the mucous and papillomatous varieties he thinks we have resources in medicine. He relates cases illustrative of these statements. In two of these papilloma of the rectum in children disappeared or came away under Kali Bromatum 1x, 3 to 5 grammes daily. Next comes five cases of laryngeal polypus, chiefly treated by operation, but in one case disappearing under Berberis in various dilutions. The instruments used in one of the operations were invented by Dr. Ozanam himself, and he has sent engravings illustrative of them.

(2) The author next calls attention to the value of Guaiacum in acute angina tonsillaris. He admits that it is from the old school, and in substantial doses, that its reputation has come; but thinks it homeopathically indicated by the symptom in its pathogenesis—"burning pain in the throat;" and finds it perfectly effective in the dilutions from 1x to 3. He gives three cases illustrative of its action, in one of which its happy effects appear in contrast with the ordinary treatment pursued in

another instance in the same subjects.

(3) Dr. Ozanam finally records a case in which a chronic dysentery occurring during pregnancy, but then checked, reappeared after delivery with a yet greater intensity, and refused to yield to any treatment for a month. Then supervened a purpuric condition, with scorbutic gums, syncopes, etc. At this point *Ergotin* 1st was prescribed, a drop every two hours; immediate improvement set in, both dysenteric and scorbutic symptoms disappeared. A proctalgia which had complicated the case remained behind, but yielded readily to *Æsculine*, the alkaloid of *Æsculus Hippocastanum*, which Dr. Ozanam finds more effective than the matrix substance.

Dr. Hughes said that Dr. Ozanam's paper came to him late. The cases were of great interest, especially the one on the action of Guaiacum on the throat. They would all be read with interest

in the Transactions.

#### SECTIONAL MEETINGS.

# Tuesday Afternoon, August 3rd.

### I.—HYGIENE.

### By Dr. M. ROTH, London.

Dr. RUNNELS having been voted to the chair, he called upon Dr. Hughes to read Dr. Roth's paper, he having kindly consented to do this for Dr. Roth.

Dr. Roth asked, What has Homospathy to do with Hygiene? He said they were intimately related. He spoke of Hahnemann's attention to hygiene, and his precise instructions. Since Hahnemann's time hygiene has advanced enormously. It seeks to attain the maximum of health, to develop physical organisation,

and to remove the causes of disease. Hygiene is of three kinds

—public, private, and remedial.

Dr. Roth was against the practice of putting flowers in bedrooms. All papers containing arsenic or chrome should be avoided. Heavy embossed papers caused much dust and injured the eyes. Regarding filters, he said a good self-cleansing filter was still a desideratum. The introduction of aniline colours had caused much poisoning; violets, magentas, and yellows should be avoided, especially in all clothes worn next the skin.

On the subject of dress, Dr. Roth made some very interesting observations. He has for long opposed the common practice of rolling babies up in yards of flannel when a dress may be made opening up the centre which does away with the necessity of

turning the infant over and over.

Dr. Roth spoke warmly of the custom now coming into vogue of sending poor children to the country, seaside, pine-forests, or alpine heights. He concluded by strongly advocating cremation, and recapitulating the address.

### Discussion.

Dr. Cooper thought we were much indebted to Dr. Roth for his paper. He wished he had had time to have spoken more on the subject of dress. The point about the dress of infants opening in front was very important. Dr. Cooper thought it a great mistake to have waistcoats made quite cold at the back and quite warm in front; this was wrong. Then it was important to have the trousers always come up the back to the same height. Shoes were much better than boots. In winter spats, or short leggings, should be used to cover the ankles. In regard to the dress of ladies, he believed that menstrual irregularities were often caused by insufficient warmth.

Another subject he would allude to indirectly bearing on the paper was the condition of rivers. Without clear rivers the population cannot be healthy. Rivers should never be sewers, but should be bearers of clear water fit for drinking. On this also bore the condition of our uplands. If the uplands were not properly planted with trees we could not have a proper water supply. It might be said that trees were the source of our rivers. The engineering profession are the strongest opponents of reforms in these matters. They are all for banking rivers,

and not for dredging and planting trees.

Dr. HEERMANN said the paper was exceedingly interesting, but too short to cover all the ground. In America hygiene was taught in homeopathic colleges. Water-closets had much to do with the pollution of rivers. Many of our malarial complaints were due to water-closets, and certain medicines had special reference to malaria of water-closets, and in this way homeopathy had special relation to hygiene. The gastric nerve was



injured by these malarias. Dr. Schweninger had brought forward a subject of great importance, that no animal except man drank at the same time that he ate. In doing this he injured the pneumogastric nerve. These two subjects the speaker regarded as specially important in relation to hygiene.

Dr. Mossa, of Strasburg, remarked on the water-supply of towns. In Dantzic, when the water-supply was changed, typhus, which had been endemic, disappeared, but the change made no difference as to diphtheria; so there is something more

·to learn.

Dr. WILDER was much interested in the paper, and hoped it would be published in the archives of the meeting.

Dr. HUCHES said that this depended on the funds, but he fully

anticipated that all the papers would be published.

Dr. Pope referred to the importance of the early portion of life, and the health during the period of education. This has been made much of lately in England. To make all children under fifteen undergo the same amount of study, whatever their capacity or temperament, was an absurdity. If children could not get food enough they could not work well at school. Dr. Pope had seen several cases of over-pressure.

Dr. Mossa said that in Germany all children from the sixth to the fifteenth year went to school. The law is obligatory, and notwithstanding that they have good food there is still much anæmia and other illness as in England. He thought the vitiated air had to do with this. Dr. Wolff attributed it to compulsory vaccination. This ill-health was also found in country places. He asked the gentlemen from the United States if this was the

· case there.

Dr. MEYHOFFER said in Switzerland education was under high pressure, and the effect of overstrain of mind was observable in girls from six to twelve. There are special classes for girls. The hours at school are from 7 a.m. till 12, and from 2 to 4 p.m. This is not enough. They have also to work at home as well. They have evening classes for preparation. There result—chemosis, gastralgia, amenorrhæa, menopausia, general debility. All physicians are aware of the facts, but Government does nothing.

Dr. Bonino said that in Italy it was the same. There was overwork and overstrain. The girls became anæmic, and the

only thing was to shorten the hours and lessen the work.

Dr. B. Schmitz complained of overstrain in the Belgian schools. He would like the Congress to adopt a resolution

on the subject.

Dr. H. M. Hobart, of Chicago, thought there was great difficulty in this matter. Doctors and parents should join together and see that the bright children should not be allowed to runalong with the slow phlegmatic ones. They required different



methods of training. He had thought the countries of the Old. World were more conservative than the New, but was surprised to find them as bad in this respect.

Dr. HEERMANN thought the motion especially concerned girls

from twelve to fourteen.

Dr. CLARKE said it was quite pleasant to hear the description of Dr. Roth's Utopia, and we should have taken away quite a pleasant impression if it had not been for the discussion. By this we were reminded that babies were not dressed properly, that children were overstrained at school, that our rivers were all wrong, and our water-closets in anything but a satisfactory state. Referring to Dr. Cooper's remarks about shoes, he said that colds were often caught from changing from boots. to shoes, and he recommended that where boots are worn in winter out of doors, house-boots, and not slippers or shoes, should be worn indoors. He paid a tribute to the great efforts Dr. Roth had made to improve the condition of hygiene, and hoped that he would persevere, and in due time we should, no doubt, have all babies dresses buttoned up the front, plenty of fresh air and pure water, our schools would be palaces of delight, and over-pressure would be unknown.

Dr. Roth thanked the Congress for the manner in which his paper was received. Referring to the subject of dress, he said trousers ought not to be suspended by braces. He referred to the use of stockings and socks with special toes. Apropos of Dr. Cooper's remarks on forestry, he said the Italian Government had planted hundreds of thousands of trees to prevent

inundations.

Dr. Runnels (in the chair) wished to emphasise the suggestion of Dr. Schmitz as to the necessity of a resolution on overpressure. He had seen much chorea and menstrual disorder from putting girls in classes in which they are brought into-emulation with boys. The female teachers also usually suffer from menstrual disturbance. He thought we had reached the limit of this thing, and ought to turn over a new leaf.

Second Day. - Wednesday Afternoon, Aug. 4th.

II.—NEED OF AN INTERNATIONAL PHARMACOPCEIA.

[Dr. Pore having been voted to the chair, he called upon Mr. John Wyborn, F.C.S., to read his paper on the above subject.

We subjoin the full text. ]—

As in chemical analysis the reagents employed must be pure or the results of investigators may differ, so in therapeutics the remedies used should be identical, or different conclusions may be arrived at. Hence the importance in therapeutical researches of having the remedies prepared according to one and the samemethod throughout the civilised world, and of securing those processes which will yield the same products under varying circumstances.

To meet the requirements of the homocopathic physician, then, it is important that there should be an International Homocopathic Pharmacoposia—one approved by the homocopathic pharmacists of all nations, and revised from time to time.

A permanent committee of revision should be established, and each member should make notes of all new discoveries, improvements which suggest themselves, and the like, and submit them for the consideration of an international convention, and those approved of might be incorporated in subsequent editions. Such revision might be made quinquennially or otherwise as agreed upon.

The chief points at which uniformity of pharmacy should be aimed at are—(1) In securing the purity and identity of all ingredients used; (2) in admitting only the same kind of impurities in chemical substances where such are unavoidable; and (3) in maintaining a standard strength of mother tincture, or at least of the first decimal attenuation of all animal and vegetable substances.

(1) The reasons for the first point are so numerous and obvious when uniform results are desired that I need not

enlarge upon them.

(2) With regard to the unavoidable impurities in chemical substances, it should be borne in mind, especially by those who maintain the theory of potentisation, that impurities in drugs are always potentised to a higher degree than the drugs themselves.

For example, if the drug contain only '001 per cent. of foreign matter, such impurity in the first decimal attenuation will have reached the proportion of 1 in 10,000, and in the first centesimal 1 in 100,000, corresponding in drug strength to the fourth and fifth decimal attenuations respectively, and so on upwards.

As regards some of the impure substances which have been proved, one is inclined to believe it possible that the impurities, and not the substances named, may have given rise to the symptome produced, or at least that the former may have modified the action of the latter to such an extent that, should such preparations vary in this respect, their beneficial action may be lost even when a perfectly pure drug, alone entitled to the officinal name, is employed.

Under this category may be mentioned bismuth—which has been said to owe its virtues to the arsenic formerly associated with it—and lapis albus, which contains the ores of several metals. It may also be fairly assumed that the bromine used in the early provings of that drug was largely contaminated by its chlorides—compounds separated from it with difficulty; and such admixture may have given rise to the varied statements of

chemists as to the boiling-point of bromine, ranging, as such statements have done during recent years, between 113° F. and 145° F. (or from 45° C. to 63° C.).

Now it often happens that the traces of impurities found in analysing a chemical preparation indicate the process by which it has been obtained, and hence the possibility of giving in a pharmacoposia suitable tests to detect a deviation from the efficinal process.

(3) The third feature—the maintaining a standard strength as a starting point of attenuation—is of fundamental importance, and the reasons for it are strengthened by the fact that in clinical records of cases treated with low potencies much misunderstanding may arise as to the exact doses employed in procuring the results published so long as various methods of preparation exist among pharmacists of different countries for want of some authoritative pharmacopæia.

That such differences do exist will be seen from the following table, showing approximately the possible variation in strength of several important mother tinctures of fresh plants, selected as examples of preparations made according to the British, American, and Polyglot Homeopathic Pharmacopeeias respectively, from plants grown in dry and in wet seasons, and consequently containing minimum and maximum quantities of water.

Under the heading "Strength of Tincture" the figures express the number of minims which are equivalent to as much of the fresh plant as would represent one grain if dried.

Name.	Loss in Drying.	Strength of Tincture.			
		In Dry Seasons.		In Wet Seasons.	
		British Homœo- pathic Pharma- copœia.	American and Polyglot Pharma- copœias.	British Homœo- pathic Pharma- copœia.	American and Polyglot Pharma- copœias.
Aconitum Napellus Agaricus muscarius Belladonna Bryonia (dioica) Conium maculatum Digitalis Dulcamara Hyoscyamus Sabina Scilla.	92 ,, 94 86 ,, 89 70 ,, 85	1 in 10 { 1 ,, 24 1 ,, 13 1 ,, 10 1 ,, 10 1 ,, 10 1 ,, 10 1 ,, 10 1 ,, 10 1 ,, 10	gr. m. 1 in 5 6 or uncertain 1 in 47 uncertain  "" "" 1 in 6 1 ,, 12	gr. m. { 1 in 10 { 1 ,, 38 1 ,, 17 1 ,, 12 1 ,, 10 1 ,, 15 1 ,, 10 1 ,, 11 1 ,, 10 1 ,, 10	gr. m. 1 in 8 or uncertain 1 in 63 uncertain  "" "" 1 in 7 1 in 17

It will be observed that in the case of Agaricus it is possible that the British tincture may be as strong as 1 in 24, while the American or that of the Polyglot Pharmacopœia may be as weak as 1 in 63, or little more than one-third the strength: in several instances, while the tincture of the American or Polyglot Pharmacopœia varies considerably, the British is constant in both dry and wet seasons; and finally, in many cases, while the former tincture is always of uncertain strength, the British is definite, and varies only slightly with one exception.

As examples of variable 1x attenuations, I may mention that Aconitum 1x (if not of uncertain strength, as when an alternative process, suggested in the American Pharmacopoeia, is followed) would vary between 1 grain in 28 minims and 1 grain in 40 minims; Agaricus 1x between 1 in 78 and 1 in 105; and Scilla 1x between 1 in 20 and 1 in 27; while the British preparation

of each would be 1 in 100, as before stated.

Thus the "American Homosopathic Pharmacopoia," compiled, and published by Messrs. Boericke and Tafel, and augmented by Dr. O'Connor (1883), gives the following proportions of measure and weight in the preparation of tinctures of vegetable substances, which are divided into four classes:—

Class I.—Equal parts by weight of the expressed juice and of

alcohol.

Class II.—Two parts of alcohol added to three parts of fresh plant, or part thereof.

Class III .- Two parts by weight of alcohol to one part by

weight of fresh plant, or part thereof.

Class IV. (which includes dried vegetable and animal substances, and also fresh animal substances).—Five parts by weight of alcohol to one part by weight.

The drug powers of these tinctures are said to be  $\frac{1}{2}$ ,  $\frac{1}{2}$ ,  $\frac{1}{6}$ , and  $\frac{1}{10}$  respectively, and either 2 or 6 minims are diluted to 10 minims to form the 1x potency of the first three classes, while the preparations under Class IV. are at once  $\phi$  tinctures and 1x.

potencies

Thus the strength of the first three classes of mother tinctures and attenuations varies with the seasons—the juice, and not the dried substance, being taken as zero, whether the former be abundant and weak or scanty and concentrated, while in tinctures prepared according to Class IV. the dried substance is taken as

the starting-point of attenuation.

In the "Pharmacopœia Homœopathica Polyglotta," by Dr. Schwabe, of Leipzig—published in five languages (1880)—the proportions and processes for tinctures of vegetable substances appear to be almost identical with those just described. But here the reason for representing a tincture of a dry plant prepared by means of five parts by weight of strong alcohol as having a drug power of 10 becomes apparent, since it is remarked

that 200 drops of strong alcohol or 100 drops of distilled water are assumed equal to 100 grains, and hence 10 drops or half-grains (not minims) of the tincture would contain the soluble matter of 1 grain.

At the same time aqueous solutions are directed to be made in the proportion of 1 grain to 9 grains (i.e. about 10 minims),

the drug power being still stated as  $\frac{1}{10}$ .

Alcoholic solutions of two parts by weight of the medicinal substance in 9 parts by weight, or 1 grain in 9 drops, are con-

sidered  $\frac{1}{10}$ .

On the contrary, in the American Pharmacopeia these are made of the strength of 1 grain to 9 grains, i.s. 1 grain in 20 drops, and the amount of drug power of the solutions is still designated  $\frac{1}{10}$ , though these preparations have only half the strength of the last described.

The methods pursued by pharmacists of different countries

also vary.

Some pharmacists obtain many of their fresh plant tinctures by merely mashing up the magma with alcohol and immediately pressing, without any idea of exhausting the plant or reducing the tincture to a standard strength—much in the same fashion and with as little utilisation of scientific knowledge as a cook would prepare horseradish sauce—while the rest are chiefly made by maceration with occasional shaking for eight days. Others use the latter process during fourteen days, and others again adopt percolation and maceration combined.

The plan on which the "British Homoeopathic Pharmacoposia" has been built up has for its objects, in addition to the identification of all substances concerning which any doubt existed, and the supplying of good practical tests whereby the identity and purity of each medicine could be ascertained, the preparation of tinctures containing all the soluble ingredients of the substance employed, uniform in drug power, and of a fixed

alcoholic strength.

In endeavouring to attain these objects all theoretical or disputed questions have been avoided, and only such characters and tests have been given as are, to a great extent at least, distinctive and necessary, while those of a less important nature, which can be readily ascertained elsewhere, have been omitted,

thus giving prominence to all which are essential.

In the case of most chemical substances in which some traces of impurities necessarily exist, the source of the substance used in the provings and the particular mode of preparation have been indicated, so as to ensure the absence of unusual impurities. And in cases where commercial drugs have been authorised the source and the process of preparation followed at the date of their introduction have, where possible, been recorded.

In the preparation of tinctures of fresh plants the complete

solution of all soluble matter is accomplished by varying the alcoholic strength to suit the nature of the ingredients in each plant, using a very dilute spirit where the ingredients are chiefly soluble in water, and a strong spirit where alcohol is the best solvent; also by using a sufficient quantity to insure the complete exhaustion of the plant.

With these ends in view, spirits of six different densities are

provided.

"In every instance the dry crude substance is taken as the starting-point whence to calculate the strength, and, with very few exceptions, the mother tincture contains all the soluble matter of 1 grain of the dry plant in 10 minims of tincture."

Directions are given for ascertaining the quantity of moisture contained in the fresh plant, and a series of tables by means of which the pharmacist can calculate the exact quantity and strength of spirit which he has to use in the case of each medicine, allowing for the water present in the plant, which mixes with and dilutes the spirit employed in making the tincture to the standard alcoholic strength decided upon.

"By careful attention to these tables, uniform products may be obtained from all plants, notwithstanding their variableness of moisture, and also by diluting the matrix tinctures with a spirit of the same strength, dilutions may be always made of the

same medicinal value."

In all instances the drug power of the British tincture is known with certainty, and therefore the 1x attenuation can always be made of a uniform strength—i.s., 1 grain in 100 minims.

Where no special method is laid down, all medicines are directed to be prepared according to one of three processes, as follows:—

Process I.—By slow or interrupted percolation.

Process II.—By maceration previous to percolation.

Process III.—By maceration alone.

Juicy plants are pressed before percolating them with alcohol, so as to remove the greater portion of their albumen, and to prevent its coagulation in their tissues, by which an obstruction would be caused to the action of the spirit.

All aqueous solutions, whether of acids or salts, are also directed to be made of the strength of 1 grain in 10 minims.

Triturations are prepared as directed by Hahnemann or Gruner with some slight modifications.

That these measures are sufficient to ensure a fair degree of

uniformity appears more than probable.

Doubtless much variability occurs in the alkaloidal strength of plants grown in different situations and at different times, but this is a difficulty which no adequate means have yet been taken to adjust. The compilers of the "British Pharmacopœia"

(of 1885) have indeed made an effort in this direction by ordering the estimation of the total alkaloids and the reduction of the tincture or extract to a standard alkaloidal strength; but, taking nux vomica as an instance, the nut of one year's growth may contain a large excess of brucine and loganine, while the powerful alkaloid strychnine may be associated with them in deficient proportions, yet making up an excess in the aggregate, and to reduce the total alkaloidal strength to a standard under these circumstances would be to weaken the active properties of the preparation.

If, however, a perfect representative of the plant or drug be secured, as it may readily be by the adoption of the means set forth in the British Homosopathic Pharmacoposia, a degree of accuracy and certainty may be attained sufficient for all purposes, and the advantages to all concerned if this be so will be great. In all countries investigators will in future at all times be dealing with known quantities under one and the same designation, and may look for uniform results from identical experiments—an acquisition which could scarcely be expected in a great number

of instances as matters now stand.

One of the chief errors of the American and Polyglot Pharmacoposias is that which recognises the mere watery juice of the fresh plant as officinal, omitting from the preparation all sub-

stances soluble only in spirit.

In justification of this course it is sometimes stated that the juices of plants have been used in the provings; but this is true only in the most limited sense, for the fact is, many of the symptoms of the provings have been obtained from the plants themselves or their flowers, roots, etc., having been eaten by mistake or otherwise, and these have, in all probability, contained medicinal substances insoluble in water but soluble in alcohol.

In other cases the quantity of menstruum used is too small to exhaust the drug, and should it, like nux vomica and opium, contain several alkaloids—some readily soluble, others sparingly so—those of the former class would all be extracted, while those of the latter would be partly left in the marc, and the operator would fail to obtain a true representation of the drug. However finely pulverised, nux vomica cannot be exhausted by five parts by weight of alcohol of the strength given in both the American and Polyglot Pharmacopæias, as will be discovered on tasting the marc after pressure and further percolation with sufficient spirit to wash it. Likewise with opium—a large proportion of the less soluble ingredients will be left in the marc after treatment as directed in these works.

Another source of incomplete exhaustion is the mixing of strong alcohol with some juicy plants reduced to pulp without previous pressure, by which the albumen becomes coagulated, and hinders the action of the alcohol in which they are merely macerated. The Pharmacopoeias of Grüner and Jahr—still much used in Germany—while directing a more perfect method of exhaustion in some cases, yet fail in other respects. All these errors may be obviated by the adoption of the British methods before described.

The facts which I have narrated afford very strong evidence

that many advantages would arise from their general use.

These methods have long had the sanction of the British Homeopathic Society, represented by the late Drs. Quin and Madden, and by the worthy editor of the last two editions of the Society's Pharmacopeia—Dr. Drury. That indefatigable worker, Dr. Richard Hughes, has scrutinised and concurred in this work, in addition to having added largely to its articles. Other pleas might also be urged for them, but enough has been said to render superfluous any further remarks of mine.

Let the British Homocopathic Pharmacopoeia, then, be submitted for the approval of the American Institute of Homeopathy as a basis for an "International Homosopathic Pharmacopceia," to be rendered more complete hereafter. Should this Association be disposed to adopt it, one great step will have been made towards its acceptance by similar societies of other nations, who may be induced to translate and improve it. will then be highly improbable that a medical practitioner in America or elsewhere, seeing a case recorded in an English journal in which it has been found advantageous to prescribe aconitum 1x, and desiring to follow the same treatment, will administer to his patient a preparation of this powerful drug three or four times the strength, though bearing the same label, as might very easily happen at present. The existing inconsistencies will be avoided, and so shall we have the uniformity of pharmacy, the advantages of which I have endeavoured in this paper to point out. Our literature will record the results of investigations with known instead of unknown or uncertain The calculations of our therapeutists will be based upon constants in place of unknown quantities. A nearer approach towards a settlement of the question of doses may be possible; and an additional stimulus will be given to the researches of pharmacists whose ambition it is to improve their art and assist in its development. To suggest a departure from the processes of Hahnemann is to commit a serious offence in the eyes of some, and a mistake according to others; but I would reply that in Hahnemann's day scientific fallacies were numerous and widely accepted without adequate examination, and that great original thinker himself occasionally committed errors, though among all his enemies he was foremost in discovering and admitting them.

### Discussion.

Dr. Hughes read a communication from Dr. Giesecke, of Carl Grüner's Pharmacy in Dresden. He requested the formation of a committee to carry out the work of forming an International Pharmacopoeia. The British H. P. was very good; but fell short in the matter of weights and measures, and in other respects was scarcely an international work. The future must be based on the method of the B. H. P. and Carl Grüner's. He (Dr. Giesecke) concluded by giving suggestions of his own.

Dr. HEERMANN said that in Paris the medicines are prepared by machine, in America and Germany by hand. It is necessary to know how these are made. A drug prepared by hand is quite a different thing from one prepared by machine. This is a factor just as potent as dilution. The subject is one on which we can only express ourselves generally. In answer to Dr. Hughes, Dr. Heermann said he referred to both triturations and tinctures in his reference to medicines made by machines.

Dr. W. T. Cowl, of New York State, said that before engaging in practice he had spent some time in making tinctures. He is familiar with the pharmacopœias. In the American Pharmacopœia it is stated that the methods there described are not regarded as theoretically perfect, but as practicable. In America many physicians prepare their own drugs. The compilers of the American Pharmacopœia he thought had this in mind in preparing that work. He thought American pharmacists would welcome a standard preparation. Where there was difficulty of preparation and elaborate directions there was more danger of falsification. Particulars might be too detailed to be practicable.

Dr. Mossa said the great difficulty in the whole question is that wild and cultivated plants contain different qualities. This should be observed and taken in connection with the recommendations of Hahnemann. It is a conceded fact. Aconite, digitalis, and phytolacca being cited as examples.

Dr. Hughes said this was provided for in the B. H. P.

Dr. Runnels said he thought there was much need for a work that should have some international authority. He had no doubt that a committee of the American Institute would co-operate.

Dr. HEERMANN seconded Dr. Runnels's motion for the forma-

tion of a committee.

Dr. Hughes said this, as a sectional meeting, could not vote on that, but could recommend the formation of a commission. Dr. Hughes moved a resolution to that effect.

This was accepted.

Dr. Hughes thought there was one deficiency in the B. H. P., and that is in its preface. Some explanation should there be given of the reasons why Hahnemann's plan was departed

from. All tinctures are now prepared by percolation, by means of expressed juice. The B. H. P. has the gre advantage of a standard zero. It seems wiser to take the crude substance of all substances as the zero.

Dr. CLARKE thought Mr. Wyborn had done a great service in bringing this subject before the Congress. He thought others must have noticed besides himself the variations in colour and strength of tinctures obtained at different pharmacies; and he was certainly surprised to learn that the 1x tincture in one country might be something very different from the 1x tincture of the same drug in another. He thought that it was clearly proved that some international standard was necessary.

Dr. Hobert said he thought that in the attenuations the difference would be lessened instead of increased. Another point he mentioned was that in America the 3x of phosphorus is taken as the mother tincture by some, and hence, in reporting

cases, confusion arises.

Mr. Wyborn (in reply) said, in reference to Dr. Giesecke's paper, that the measures and weights of the B. H. P. are those used where English is spoken, and there are comparative tables given. The specific gravity is the real test for tinctures. To exhaust any substance with four parts of liquid is in many cases impossible. In the case of opium twenty parts at least are required. He did not agree with the remark that wild plants gave tinctures of uniform strength. In answer to Dr. Cowl he said that his means of estimating the strength was simple—that of estimating the quantity of water. The reason why there was no explanation of the change from Hahnemann's method in the preface to the B. H. P. was that it is given in the introduction and throughout the work. The difference, however, is not great. In England there is constantly the same mistake regarding phosphorus as that referred to by Dr. Hobart.

Dr. Pope (in the chair) made a few remarks, and read the resolution draft by Dr. Hughes. This was carried unanimously.

"That having heard the papers by Mr. Wyborn and Dr. Giesecke, this meeting thinks it very desirable that there should be a universal Homosopathic Pharmacopoeia; and requests the Convention to appoint a Commission to inquire into and further such a proceeding."

Proposed by D. Runnels, seconded by Dr. Heermann.

## Impromptu Meeting, Wednesday Evening, August 4th.

[To complete our Report of the Convention, we subjoin Dr. Roth's address on the subject he had touched upon briefly in his paper on Hygiene—dress. In response to a widely expressed wish that he would expand the brief remarks he made on this subject, he kindly consented to do so provided time could be found.—Ed. H. W.]

## A Few Remarks on Dress. By Dr. Roth.

Dr. Roth said: Gentlemen,—It is not my fault that you are again obliged to hear me after having done so almost constantly during the last two days. It is at the request of Dr. Cooper and several other of our colleagues that I address you, and as I was neither prepared for doing so, and had no time to make notes, you will excuse my coming before you with but crude remarks.

Addressing my colleagues, who know just as much as myself on the subject of dress, I have scarcely anything new to communicate. You all know that the principal object of dress is, first, to retain our natural heat; secondly, to protect our bodies against the various atmospheric influences and changes to which we are exposed; and I may, perhaps, add that it is the opinion of many people that dress should contribute towards beautify-

ing and adorning us.

The materials of dress are taken principally from the animal and vegetable kingdom, and consist mostly of wool, silk, fur, felt, leather, feathers, and down; linen, cotton, several grasses, straw, and the internal bark of trees. From the mineral kingdom I can only mention asbestos. The various animal and vegetable substances are mixed in great variety, and thus a large number of clothing materials are produced more or less suitable to the several seasons. On this part of the subject I do not intend to enter into further details.

From a hygienic point of view we must be careful not to employ such colours as when in contact with the skin produce irritation, eruptions, etc. Thus the aniline colours, as magenta, yellow, red, violet, used for the dye of stockings, have been observed to cause various skin disorders; chrome yellow and the various shades of arsenical green are also very injurious; green flowers and leaves used as ornaments on ladies' dresses have caused symptoms of arsenical poisoning, but my time does not permit me to enter fully into the important subject of colours, and I must restrict myself to mentioning the disagreeable effects of a bad choice of colours in ladies' dress, which on sensitive eyes produce the most disagreeable sensations.

It is extremely important that no article of dress should interfere with free respiration, free circulation, or any of the movements of the different parts of the body; therefore no portion of a dress should cause undue pressure on any part of the body, and no mark of such pressure should be observable anywhere.

In head-dress, tight hats, or caps for men and boys, tight ribbons, and elastics for fastening ladies' bonnets and caps, are always to be avoided, because they, as well as the tight collars of shirts and dresses and necklaces, cause headache, giddiness, bleeding from the nose, abnormal sensations in the ears, etc. Ladies' bonnets made according to the fashion cover either only

a part or the whole surface of the head. During the last few years it has been the fashion to leave the front and upper part of the skull perfectly uncovered; thus rheumatic and neuralgic pains and colds in the head became prevalent. At that time Punch published a picture where a "tiger" was carrying a bonnet behind, and very near to the back of the lady's head without touching it at all. At present it is the fashion to leave a part of the upper and the whole of the posterior surface of the head uncovered, and thus these parts are entirely unprotected, except when the ladies have a quantity of their own or artificial hair; and, at the present moment, the fashionable hats with the brim raised on one side are placed on one side of the head only, and thus one-third of the upper surface of the head is exposed

in the opposite direction.

On the bad effects of tight corsets, stays, girdles, bands, dresses, etc., medical men have written for more than a century without succeeding in inducing women to give up the habit of being tightly laced and compressed. You know very well all the baneful effects which occur in consequence: how woman's health becomes undermined, and how many of the diseases to which women are especially liable are thus produced. One of my colleagues has asked how women can be most suitably dressed. The natural answer is that they ought to avoid all articles of dress which compress both sides of the chest, which prevent deep inspiration and expansion of the lateral parts of the chest, and which press the abdominal organs downwards. As it is impossible to prevent women wearing stays and corsets, I will mention the best form—that which is the least injurious. The measure for a stay should be taken after a deep inspiration, and while the thorax is fully expanded through the increased quantity of air which is still filling the lungs. A second measure should be taken when the expiration has been completed. The difference of the two measures, which varies from one and a half to two and a half inches, should be supplied by an elastic webbing being inserted on both sides of the stay, and throughout its full length. A very good arrangement is to have the stay divided into two parts, an anterior and posterior, which are connected together by elastic bands of one inch in width, and are alternately fixed on the two parts. The transverse elastic stripes are fixed in such a manner that one seam is run on the posterior side of the front half, while the other seam is sewn to the anterior half of the hind part of the stay. The second transverse stripe will be sewn in the contrary direction—that is, on the anterior side of the front part and posterior side of the back part. This alternate arrangement of the transverse elastic stripes permits a perfect fitting of the corset without causing any pressure. No large steel or whalebone ought to be inserted as a busk in the middle of the front of the stay, and if this part is made to be

laced or fastened by buckles, or by three or four transverse straps with hooks, the rucking-up of the material is prevented by the insertion of small and thin whalebones, which can be used to any amount. No shoulder-straps should be used, and the length of the stay should begin one inch below the armpit. Stays made on this principle, although different in form, will contract and fit during the expiration, and will enlarge during inspiration. They will not interfere with the various turning and bending movements of the body, and therefore not cause any injurious effects. The arrangement for inserting the elastic webbing can be changed in various ways, as by having an oblique longitudinal elastic stripe inserted on both sides of the stay. It is also desirable to prevent pressure on the mammary glands, and therefore the gussets must be made in proportion to their size and form, in order to give them a support. Porous materials are preferable, in order to allow of evaporation from the sudatory glands. If stays are made to lace behind, and if it is necessary to open them, a flannel strip should be used to cover the spine, which is usually uncovered, and therefore colder than all the other parts.

A controversy has been raised about the fastening of the petticoats, drawers, and underclothing of women; some maintain that they should be fastened by braces or bands crossing the shoulders, in order to prevent any abdominal pressure. I object to this, because the weight of the underclothing induces the shoulder-blades to come forward and thus to cause a slight stoop, a round back, flat chest, etc. Abdominal pressure is prevented by the use of circular bands, which are sloped out at the upper edge in front, are fixed on and not above the hips, and fastened behind by two or three buttons. These bands, which form the upper part of the petticoats and drawers, vary in width from three to four inches, but when used for drawers they are opened on both sides of the hips by one or two buttons.

The fastening for gentlemen's trousers is done on a similar principle, as a circular band, which is formed by an elastic webbing of two to two and a half inches in width, is fastened inside the trousers, on the seams, corresponding to the height of the hip, and forms the posterior part of the circle, while the anterior part is formed partly by the right front part of the trousers, and an additional strap fixed inside on the left seam corresponding to the height of the left hip; here the circle is closed on the left side between the navel and left hip. I repeat that it is specially important that the circular bands, in both male and female attire, should be on and not above the hips.

Lately a new fashion has been introduced of using a special circular band for fastening stockings. These bands can be very well dispensed with, because if there is a loop on the outside of the top of the stocking to which a tape, with or without elastic.



is attached, this tape can be fastened on a button fixed in the front and on the outside of the circular band, and for this purpose a hole is made in the petticoat for the passage of the tape. In this way the injurious pressure caused by garters is prevented, the stocking is easily fixed, the movements of the legs are free,

and no additional circular band is required.

Many years ago I was induced to try the effect of digitated socks for the purpose of retaining the paralysed toes of a child in their natural position. Since that time I have found them useful in cases where there is an excessive perspiration between the toes, or where abrasions of the skin have taken place. At that time, about thirty years ago, I fancied that I was the first to invent stockings with toes, but my pride as an inventor was soon dispelled when a year or two afterwards I saw the officers of a Japanese Embassy wearing stockings with a division for the big toe. I have alluded to this trifle because Dr. Jaegar, who has become notorious by his advocacy of a merely woollen clothing system as the only hygienic one, has been assuming the title of great inventor of digitated stockings!

Instead of making any remarks on the form of hygienic boots and shoes, I prefer to mention Professor Meyer's little book, entitled, Why Does the Shoe Pinch? The principal features in hygienic boots are that the outline of the foot should be taken after the full weight of the body has been put upon it and all the toes placed each in its natural position; the measure for the instep must be taken while the person is sitting; the thickness of the heels should correspond to that of the soles, and have the same outline as the natural heel. Lacing is preferable to elastic sides or buttons, because the boot can always be kept in the same position and adapted to the comfort of the pedestrian, while elastics, after a short time, lose their elasticity,

and are frequently torn in the direction of the ankles.

During the last few years underclothing has been made of woollen, cotton, or silk netting, with the object of having a layer of air between the body and the ordinary clothing. A similar object is obtained by vests of Shetland wool very loosely knitted and containing large openings; undulated créps vests have also been introduced for the same purpose.

In water-tight dresses it is desirable to have openings with flaps for the purpose of ventilation, otherwise the whole body is in a perspiration, because, without these openings, the dress is

not only water-tight but air-tight.

Some preparations of alum are recommended for making the material water-tight, while not interfering with the ventilation of the body.

I regret that I have no models with me for the purpose of illustrating the principles of hygienic dress, but our American colleagues who are present and are interested in the subject

may find a collection of illustrations of Physical Education in the Government Educational Department at Washington, which I presented to the American Government. This collection was exhibited at the Health Exhibition, South Kensington, in 1884, and a gold medal was awarded to it. Besides this acknowledgment I received a few months ago an additional bronze medal for the baby's dress exhibited in that collection. I have for many years been impressed by the improper modes of handling of new-born and older babies by their mothers and nurses. The little creatures are turned round from five to six times while being dressed, often to their great distress and discomfort, and this suggested the idea of making all babies' dresses to open in front. While dressing the clothes should be placed on a pillow in layers, the outer clothing being first and the other layers following, in such a manner that the bandage for the navel and the napkin are placed uppermost; the baby is laid down on the topof all the garments, and one layer after the other is fastened in front without changing its position.

For school girls and younger boys blouses are most suitable with a yoke round the neck, large arm-holes, and the body in folds, fastened either by a belt or by tapes. Arm-holes in general should be circular at the top and elliptical in the lower part, or a gusset ought to be inserted in the lower part. Girls and women often have trouble when putting on their vests and shirts, because the opening at the top of these garments is too small; they are thus obliged to wriggle with the shoulders, and to raise them up in order to place the arms into the sleeves. Openings six or eight inches larger in front would prevent this inconvenience. Boys and men are often stooping, their shoulders brought too much forward, their chest flattened, the movements of their arms interfered with, and besides they are unable to take a deep breath in consequence of the tightness of their coats across the shoulders. If tailors would take the measure across the chest while the arms are horizontally raised, and the person requested to stand upright, all these disagreeables might be prevented.

I fear I have detained you much longer than I intended, although I have tried to give a mere outline of the subject, and I have only to thank you for the kind attention with which you

have listened to my aphoristic remarks.

This address was listened to with great interest, and received with much applause. At its conclusion a very hearty vote of thanks was accorded to Dr. Roth for his kindness in delivering it.

### SUBSCRIPTIONS.

In addition to the subscriptions announced last week, we have

to acknowledge the receipt of £1 1s. from Dr. George Scriven, of Dublin, and 10s. each from Drs. Rush and Church, of Salem, Ohio, U.S.A.; Dr. Black Noble £1 1s.

# AN OPEN LETTER TO THE EDITOR OF THE ALLGEMEINE HOMÖOPATHISCHE ZEITUNG.

SIR,—I have not the advantage of seeing your periodical until several weeks after its appearance, so that my remarks. on your note of August 3rd about the International Homeopathic Convention may perhaps appear rather late. However, I do not think that it can ever be too late to direct attention to matters which concern the prosperity and advancement of the great therapeutic reformation commenced by Hahnemann. You consider that in the mode in which you have acted towards the International Homeopathic Convention you have completely fulfilled your duty as an editor towards it (unserer redactionellen Pflicht vollständig genügt). I think, considering the sentiments that inspired the International Convention at its meeting in London in 1881, in selecting a place on the Continent conveniently situated and easily accessible to the homeopaths of Germany, France, and other countries of Europe, that its cordial invitation might have met with a more cordial response from the medical men for whose special convenience the Convention showed such concern; but where we looked for hearty co-operation we found less than "benevolent neutrality." In the first place, the homeopaths of Belgium, who had accepted "avec empressement" the task of making the needful preparations for the Convention, suddenly and without warning declared that they would not, at any price, have the Convention meet in Belgium, alleging as a reason for their refusal that they had not received a sufficient number of memoirs to occupy the time of the Convention, nor a sufficient number of promises of adhesion from homoeopathic colleagues to lead them to expect a large gathering; the fact being that they had taken little or no trouble, beyond sending out a printed circular, to obtain the adhesion of colleagues to the proposed meeting. Next, a letter from Dr. Weber, the presidentelect of the Central-Verein Congress, appeared in your columns condemning absolutely the idea of an International Convention.

To this letter your gave your complete assent, and announced at the same time that you would have nothing more to do with the International Convention; and yet you strangely assert that you have sufficiently proved your good wish to promote the objects of the Convention (wir glauben unsern guten Willen, die Sache zu fördern, hinreichend bewiesen zu haben). This extraordinary, unexpected, and, in our opinion, most unfraternal treatment of colleagues whose sole aim and object in holding the Convention on the Continent was to study the convenience of their continental brethren, was near wrecking the Convention altogether, and had it not been for the indomitable energy of the permanent secretary, Dr. R. Hughes, there would most likely have been no quinquennial meeting of the Convention at all this year. As it was, your indifferent, if not hostile, attitude towards it was doubtless the cause why only three of our German colleagues attended the meetings of the Convention at Basel, which had representatives from America, Britain, France, Denmark, Belgium, Italy, and Switzerland, and why the proceedings of the Convention were perhaps not so interesting and important as they might have been. But I think you will allow that, in spite of your opposition, they will compare favourably with the transactions of the Central-Verein at Frankfurt, for the sake of which, apparently, our German colleagues, as represented by you and Dr. Weber, endeavoured to sacrifice the International Convention.

The partisans of homeopathy of this country and of America are greatly disappointed to find such indifference to general and united efforts to advance homeopathy among the countrymen of Hahnemann. L'union fait la force, and the unceasing and virulent attacks of the allopathic adversaries are only to be effectually resisted by showing a united front to the foe. We are quite conscious of our own shortcomings, but had we been invited by our German brethren to join with them in an effort to combine for the purpose of promoting the scientific or social development of homeopathy, we should have considered it our duty to join cordially with them in such a desirable object, and we would certainly not have treated the proposal with the contemptuous indifference and even open hostility displayed by our German and Belgian colleagues.

We owe too much to the labours and talents of Hahnemann's countrymen to view with indifference their withdrawal from the effort initiated by the International Homeopathic Convention to advance the interests of homeopathy by the united action of all its partisans. The hostility and persecuting zeal of the allopathic adversaries were never more conspicuous than at the present moment, and if we would not see homosopathy crushed we should remember that we can only save it from this fate by boldly asserting ourselves and claiming coram populo our true position as the representatives of the only scientific therapeutics. unitis" should be our motto, and we cannot afford to fritter away our strength in desultory action and individual effort. Are our German friends so content with the results obtained by the languid and perfunctory annual meetings of their Central and other societies, where, for want of something better to do, they occupy their time with the serious consideration of such ignes fatui as Peczely's Eye-diagnosis, Jaeger's Neuranalysis, and kindred themes, or with mere personal wrangles, that they deem any further effort to secure for homeopathy its proper place in medicine super-Do the countrymen of Luther think that a great reform can be accomplished by sitting at home with their arms folded and sneering at the efforts made by their neighbours to spread a knowledge of the new evangel?

There are in Germany many practitioners of homeopathy richly endowed with all the qualities that go to make up scientific and accomplished physicians, but for many years past they have hardly given any signs of their existence. They start new periodicals, promising much, but after a short period these languish for want of support, and then cease to appear. The Berlin Homeopathic Society's organ still survives, and will be always remembered with gratitude as having given to the world Ameke's masterly work; but now, alas! in place of presenting us with any original materia medica work, it wastes a large portion of each number in the reproduction of Hering's useless and incorrect Condensed Materia Medica! The Hom. Monateblätter seems to be almost entirely given up to Peczely's Eye-diagnosis and the anti-vaccination crusade. The Pionier only treats of homeopathy as one of a dozen other subjects it takes under its patronage - from Wagner's music to Schopenhauer's philosophy, amidst which homeopathy only receives stepmotherly treatment. Lastly, there is your own highly respectable periodical, the Allgemeine Hom. Zeitung, which in past times has rendered great services to homeopathy,

but which has now dwindled down to such a dead level of mediocrity that we know not which most to wonder at-how it can maintain such an unvarying monotone of dulness, or how it can find readers. Surely, when it can find nothing better to regale its readers with than dreary columns of Buchmann's bogus provings of high dilutions in well-corked bottles held in the hand, wearisome accounts of Peczely's fantastical eye-diagnosis and therapeutics and lazy remonstrances at having the apathy of its countrymen disturbed by the fussy activity of their foreign colleagues, it is about time this antiquated periodical performed hari-kari, or I might say ceased to pretend that it is alive when every one can see that it has no life in it. The only liveliness it has lately exhibited was its opposition to the project of the International Homeopathic Convention to infuse a little vitality into German homocopathy. It was dead against any such scheme. But it seems hardly worth while to continue in existence for the mere purpose of proving you are more dead than alive, so I would recommend the "happy despatch" to our venerable friend. I am all the more qualified to give it this advice, as when I was convinced that the British Journal of Homeopathy was no longer needed I heartily concurred in the resolution of the editors -of whom I was one—to suppress it, and devote ourselves to work more useful to homeopathy.

What homeopathy needs at the present time is—1 st, the reconstruction of its unwieldy and unscientific materia medica, and in this good work America and England are now fraternally engaged; 2nd, the dissemination of a knowledge of homeopathy among the people, a spirited resistance to the attacks and persecutions of the allopaths, and an exposure of their unacknowledged pilferings from homeopathy; and for this object our Homeopathic League has been set on foot. Both these works are required in every country in Europe as well as in Britain, and Germany is especially rich in men who could lend useful assistance to these much-needed methods of advancing scientific therapeutics from within and from without.

Your obedient servant,

9th September, 1886.

R. E. DUDGEON.

# INSTITUTIONS.

## LONDON HOMCEOPATHIC HOSPITAL.

### NEW ENDOWMENT.

THE latest endowment at the London Homeopathic Hospital is the endowment in perpetuity, by a payment of One Thousand Pounds, of a bed in memory of the late Daniel Bax, of Kenmure, Streatham, Surrey. No feature of the recent history of our Hospital is more gratifying and encouraging than the steady additions to the number of Endowed and "In Memoriam" beds.

## FINE ART DISTRIBUTION.

The preparations for the Fine Art Distribution are now being pushed forward rapidly, and from a catalogue of the pictures and other works of art already received it appears that the total value of the prizes given for the purpose is between £700 and £800, ranging in value from £40 to £1 1s.

### THE PRIZES.

There are two prizes of 40 guineas, one of 35 guineas, two of 25 guineas, six of 20 guineas, sixteen between 20 guineas and 10 guineas, twenty-six between 10 guineas and 5 guineas, and sixty-six between 5 guineas and 1 guinea. A prize is promised from Sir J. D. Linton, Bart., the value of which may be 100 guineas. Without reckoning this, the total value is £750, and the total number of prizes 130, with many consolation prizes in addition.

### CONTRIBUTING ARTISTS.

Among the artists represented on the prize list are Sir James D. Linton (President of the Royal Institute of Painters in Water Colours), T. Oldham Barlow, R.A., Arthur Croft, Charles Jones, Samuel Bird, Albert Edward, Tristam Ellis, W. H. Wheeler, Annie Wheeler, John Absolon, Gustave Doré, Robert Macbeth, A.R.A. and Ernest Parton, while others equally eminent are expected to contribute.

### LEGACIES.

Some years ago Miss Sophia Milton left a sum of money in Great Indian Peninsula Railway Stock to the Hospital, the greater portion to be paid at her death, and the remainder, £500 stock, to revert to the Hospital at the expiration of a life interest. The life interest having just terminated, the amount,

£500 Great Indian Peninsula Railway Stock, has reverted to the Hospital.

A short time ago Mrs. Catherine Greaves left the Hospital a

legacy of £800, which has also been received.

### RESIDENT MEDICAL OFFICER.

The successor to Mr. Hermann G. Hilbers in the post of Resident Medical Officer is Dr. D. R. O'Sullivan.

# GENERAL CORRESPONDENCE.

## HAHNEMANN AND NICOTISM

To the Editor of the Homeopathic World.

Sir.—In reference to Hahnemann's continuous smoking, Dr. Hahnemann, in a letter I have received from him, says: "My grandfather never left off smoking entirely, but he began to restrict his smoking in his eightieth year from doing so all day long to smoking only one pipe per diem. . . . I do not know whether this restriction caused his premature death at eighty-nine years."

I am, yours truly,

THOMAS ENGALL.

27, Lady Somerset Road, N.W. Sept. 11th, 1886.

# VARIETIES.

ALBUMINURIA IN ACUTE ARTICULAR RHEUMATISM.—In a recent thesis Dr. Chéron details the results of certain investigations which he has been making concerning the condition of the kidneys in acute articular rheumatism. He found albumen in the urine in about 49 per cent. of the cases examined. Its presence is due, he thinks, to a passing renal congestion, an ordinary mild form of nephritis, or, occasionally, to renal embolism. The existence of albuminuria, he says, offers no contra-indication to the continued exhibition of sodium salicylate.—(Archives Générales de Médecine, November, 1885.)—Practitioner.

Cocaine in Whooping-cough.—In a pamphlet recently published Dr. Moncorvo has advocated the employment of cocaine in pertussis. The hydrochlorate of cocaine is used as an adjunct to the treatment of the malady by resorcin, for which Dr. Moncorvo stands sponsor. The upper parts of the larynx are first to be mopped with the 1 per cent. solution of resorcin, and then a 10 per cent. solution of the hydrochlorate of cocaine is applied. The cocaine should be used frequently.—(Lancet, Sept. 26, 1885)—Practitioner.

PEROXIDE OF HYDROGEN IN EPILEPSY.—Dr. B. W. Richardson. speaks of the benefit he has derived in many cases from the use of peroxide of hydrogen in epilepsy, and states his conviction that the drug demands a more extended trial than it has hitherto had. The dose is a drachm of the ten-volume solution, given thrice a day in half a tumbler of water, gradually increasing the quantity to two or three drachms. A drachm of glycerine added to each dose reduces the metallic taste. — (Asclepiad, October, 1885.)—Practitioner.

ACTION OF ARSENIC ON SWEAT.-M. Monin states that he has noticed in the case of a lady who was taking Fowler's solution of arsenic, the occurrence of very offensive axillary sweats, which ceased when the medicine, at her earnest request, was discontinued. -(Journal of Cutaneous and Venereal Diseases, No. 7, vol. iii.)—Prac-

titioner.

## MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Aveling (J. H.). On Inversion of the Uterus. Illus. Cr. 8vo, pp. 54. (Churchill. On Inversion of the

Bastian (H. C.). Paralyses, Cerebral, Bulbar, and Spinal: A Manual of Diag-nosis for Students and Practitioners. 8vo. (H. K. Lewis. 12s. 6d.) Berdt-Hovel (Dennis D.). On Some Con-ditions of Neurasthenia. 8vo, pp. 20.

(Churchill, 1s.)

(Churchill. 1s.)
Glibbes (H.) Photographic Illustrations of Normal and Morbid Histology and Bacteriology, including Moulds, etc. 25 Subjects. (Churchill. 1s. 6d. each.)
Guy's Hospital Reports. Vol. 48. Edited by Frederick Taylor, M.D., and N. Davles-Colley, M.A. Svo, pp. 514. (Churchill. 7s. 6d.)
Harmwood (W.A.) Tresting on the Dis-

Hammond (W. A.). Treatise on the Dis-cases of the Nervous System. 8th ed., revised and enlarged. 8vo. (New York.

254.)

Heath (C.). A Manual of Minor Surgery and Bandaging. 8th ed. 12mo, pp. 360. (Churchill. 6a.)

McOosh (J.). Physiology: The Cognitive Powers. Post 8vo, pp. 250. (Macmillan. 6s. 6d.)

Manual of Hygiene. Prepared by Pro-vincial Board of Health, Toronto, Canada. 12mo, pp. 201. (Toronto. 6s.)

Murreli (W.). Massage as a Mode of Treatment. Post 8vo, pp. 78. (Lewis. 38. 6d.)

Neale (R.). First Appendix to the Medi-cal Digest. Including the Years 1832-5, and Early Part of 1836. 8vc, pp. 250. (Ledger, Smith, and Co. 15s. 6d.)

Pritchard (U.). Handbook of Diseases of the Ear, for the Use of Students and Practitioners. Post 8vo, pp. 208. (Lewis. 4s. 6d.)

Ridge (J. J.). Diet for the Sick. 3rd ed. 16mo. (Churchill. 1s. 6d.)

Royal London Ophthalmic Hospital Reports (The). Vol. 11, Part 2. Edited by R. M. Gunn, M.A., F.R.C.S. With Plates. 8vo. (Churchill. 5a.)

# SHORT NOTES, ANSWERS TO CORRESPONDENTS, ETC.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. Clarke, 15, St. George's Terrace, Gloucester

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

Notice.—We intend always Road, South Kensington, S.W. | to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

Dr. J. P. Sutherland, Boston, U.S.—Nostra culpa! The June, July, August, and September numbers of E. M. G. have been duly received and should have been acknowledged. The demoralising effect of the holiday season is our only excuse. viously to June we have not seen the E. M. G. during our editorship, and we are not aware that there has been any exchange before. Many thanks for your kind note. We are very glad the MS. was in time.

### CORRESPONDENTS.

Communications received from Dr. Boniface Schmitz, Antwerp; Messrs. Keene and Ashwell, London; Dr. Leseure, Lucerne; J. H. Cross, Landulph; Dr. Murray Moore, New Zealand; Dr. J. P. Sutherland, Boston, Mass.; Dr. Engall, London; Dr. Pope, Tunbridge Wells; Dr. Dudgeon, London; Mr. C. Ford, London; Dr. Bonino, Turin; Mr. J. C. Pottage, Edinburgh; Dr. Harmar Smith, Guildford.

BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische

Zeitung.—Zoophilist. — Medical Advance.—Monthly Homonopathic Review. - Revue Homoeopathique Belge.-Homöopatische Monatsblätter.— New York Medical Times.— American Homoeopathist.— St. Louis Periscope.—Medical Current. — Clinique. — Medi-Visitor.—Chemist Druggist. — Hahnemannian Monthly.—Bibliothèque monopathique.—Medical Era. —Medical Annals.—California Homosopath. — The Clinical Review.—Homoopathic Physician.—Homoopathic Recorder.—Medical Counselor.— L'Art Medical.—Bibliothèque Homocopathique. — St. Louis Medical Journal.—Medical Investigator. — Albany Medical Annals.—Homosopathic Journal of Obstetrics. — Clinical Review.—Southern Journal of Homosopathy.—The Builder. —Medical Advocate. — New England Medical Gazette, June, July, August, and September. — Revista Argentina Medicas. — Revista Ciencias General de Homeopatia, Nos. 1-8, Bilbao. — Maanedsckrift fur Homocopathi. — Revista Omiopatica.—A Decalogue for the Nursery. By A. S. Donaldson, M.D.—Tincture Making. By L. T. Ashwell.—Cholera Second Edition. Treatment. By Dr. Rajendra Lal Sur.-Therapeutics founded Organopathy and Antipraxy. By William Sharpe, M.D., F.R.S.—Homosopathic Treatment of Infants and Children. Dr. Ruddock. 5th edition.— The Lady's Manual. Dr. Ruddock. 9th edition.

School of Mediumin.

## THE

# HOMŒOPATHIC WORLD.

## **NOVEMBER 1, 1886.**

# HAMAMELIS AMONG THE ALLOPATHS; OR, HOW NOT TO DO IT.

THE Practitioner for September contains the following paragraph, extracted from the Therapeutic Gazette for May, without any note of adverse comment:—

### "ACTION OF HAMAMELIS VIRGINICA.

"The great sale and mysterious properties of Hamamelis have led Drs. John Marshall and H. C. Wood, of Philadelphia, to undertake an investigation of the drug. The results which they have reached are in accord with those of Dr. HECTOR GUY, of Paris, who came to the conclusion, as the result of numerous experiments, that Hamamelis virginica is not toxic; that it has no special physiological action on the vascular system; and that it contains no alkaloid. They show that there is a very large percentage of tannic or gallic acid in the fluid extract; and the results which have been obtained by some physicians by the use of this fluid extract in cases of hamorrhoids and varicose veins are apparently explained by the presence of the astringent principle. The tannic acid of course would not come over in the distillation; therefore the much-used and still much-lauded witch-hazel, or the so-called distillates of witch-hazel, must depend for their virtues, say Drs. MARSHALL and WOOD, upon the alcohol which they contain and the faith which they inspire."

The experiments here alluded to are of two kinds—chemical and physiological. The investigators who conducted them fondly imagine that by dint of chemical analysis, and the combined poisoning and vivisecting of animals, they can ascertain the properties of drugs as regards diseased human beings. And this is the result of all

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their labours:—"The much-used and still much-lauded witch-hazel, or the so-called distillates of witch-hazel, must depend for their virtues, say Drs. Marshall and Wood, upon the alcohol which they contain and the faith which they inspire." Happily our trusty friend, Hamamelis, in no way depends for its virtues on the verdict of Drs. Marshall and Wood and the results of their experiments; the drug will go on its curative way just as if they had never experimented and had never spoken.

Dr. LAUDER BRUNTON is the editor-in-chief of the Practitioner. He has recently published a book full of the records of experiments of the MARSHALL and Wood type. But though, in deference to the experimenting fashion of the day—which Dr. Brunton follows and is supposed to lead,—he puts these experiments into the most prominent place, he is not quite so foolish as to be content with their teachings. With how much faith has Hamamelis inspired Dr. Brunton? Let us see.

On page 296 of his *Pharmacology and Therapeutics* Hamamelis is classed as a "vascular sedative"—whatever that may be—at any rate something different from either alcohol or tannin. Skipping over some 650 pages we come to a further description. On page 940 we find that "it contains tannic acid and a bitter principle." Regarding its USES we find:—

"It is used as an external application to piles, bruises, and inflammatory swellings. Internally it is a very efficient hæmostatic in bleeding from the lungs and other internal organs. In some cases of hæmoptysis I have found it more efficient than ergot, although in other cases digitalis and ergot have succeeded better. It checks the flow in menorrhagia when given during the period, and it lessens pain in dysmenorrhoea. In one case a patient informed me that it invariably caused seminal emissions, which ceased when it was discontinued. In this action it resembles strychnine. It has been supposed by DUJARDIN-BRAUMETZ to owe its utility to an action on the muscular fibre of veins."

This is a pretty good advance on the "vascular sedative" of the earlier page, and it shows the faith of Dr. BRUNTON developing. But this is nothing to what we find in the

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famous "Index of Diseases." When we come to page 1092 and following, we find that Dr. Brunton's faith in Hamamelis has grown in a kind of geometrical progression. The "vascular sedative" of page 296 is here set down as able to cure dysentery, the itching of eczema, epistaxis, hæmaturia, hæmoptysis, post-partem hæmorrhage, hæmorrhoids, whiteleg, and wounds!

In his bibliography Dr. Brunton does not mention a single authority for Hamamelis, leaving it to be inferred that all these recommendations are original. But how did he learn all these properties of Hamamelis? Not from experiments like those of Wood and Marshall, certainly; he learned them from the provings and practice of homeopathists.

This is but a single example of the contents of all his big book. The way not to learn the curative virtues of drugs is to observe their action on vivisected animals. This is the method he recommends, it is true; but his doctrine is worse than his practice. When he wants to know what a drug will do for sick humanity he goes not to his vivisections, but to homeopathists. But, in deference to the singular unwritten "code of ethics" of his sect, he says nothing about the source of his therapeutics, leaving the unwary to suppose that his elaborate experiments on wretched dogs, cats, and frogs suggested what the *Medical Times* would call, were it still existent, his "therapeutic tips."

And now let us see what his brother in the art of appropriating homoeopathy without acknowledgment, Dr. RINGER, has to say of this drug. There is a striking family likeness in the confession of faith of these two writers. Dr. RINGER says (Handbook of Therapeutics, p. 328) it is most serviceable in passive hæmorrhage, or in bleeding from small veins; for bruises and oozing from wounds and sores, hæmorrhage when taken internally or applied locally; purpura, dysentery, piles, varicocele, and varicose veins; white-leg; cold in the head, and hay fever. One or two drops are generally quite sufficient to check bleeding, but much larger quantities sometimes succeed when smaller fail. Large doses sometimes cause severe headache. Dr. RINGER's authorities are two

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gentlemen unknown to fame, a Dr. Hall and a Dr. Preston! Their works are not named.

But this drug, the virtues of which Drs. Marshall and Wood affirm are to be attributed to alcohol and faith, has lately formed the subject of a paper at the Brighton meeting of the British Medical Association, presented by Dr. Shokmaker, of Philadelphia. We quote the Lancet's (Aug. 14) abstract of his paper as an antidote to the passage quoted above from Dr. Brunton's Practitioner:—

"Dr. JOHN V. SHOEMAKER (Philadelphia) contributed an able paper on the Witch Hazel (Hamamelis Virginica) and its therapeutic uses. It had long been used, he said, as a domestic remedy, but was in reality a powerful therapeutic agent worthy of the attention both of physicians and surgeons. It was not only anodyne, but hemostatic. It was employed in America in many forms—not only in the forms which were officinal, such as the liquid extract, but also as hazeline, which was an aqueous distillate. If it failed it was from being used in inappropriate cases. It was said by some that the good effects were due to the spirit contained in the preparations, but such was not the case, for he had tried weak alcoholic solutions against the Hamamelis, and had no hesitation in saying that the latter was incomparably superior. The solutions of Hamamelis contained a volatile oil, on the presence of which much of the activity depended. Perhaps some of the failures were attributable to the fact that insufficient quantities were given. It was not only an astringent, but an astringent tonic. It was not generally known that it was a cardiac sedative. He had found it act like magic in hemorrhage after the failure of quinine, ergot, and a number of other drugs. would check bleeding after parturition, especially when it assumed a chronic form. In chronic epistaxis it would often save life when other remedies were hopeless. He had used it in two cases of hæmophilia with absolute success. In hæmorrhage from the bowels, purpura, and many similar conditions, it might be relied on absolutely. He had seen good results from its use in varicose veins, and had cured eleven out of seventeen cases of varicose ulcer by it alone. It was useful in chronic diarrhose, leucorrhose, and gonorrhose; nothing was better in some forms of sone. In America it was largely used in the treatment of chronic naso-pharyngeal catarrh, and also as a mouthwash.

"Dr. Pollok (Glasgow) fully corroborated Dr. Shoemaker's statements, and said that he had found hazeline useful in a great number of cases. Its good effects might to some extent be due to the terebene it contained."



Dr. Shoemaker has evidently not studied the drug in the physiological laboratory, and we commend the perusal of his paper to all those who are inclined to rest content with the comfortable negations of MARSHALL and WOOD. British Medical Association are now engaged in collectively investigating Hamamelis. It would save them much trouble if they went first of all to Drs. RINGER and BRUNTON and found out from them how and where they discovered the therapeutic properties of this much-praised and much-abused drug. They would soon learn-if these gentlemen had the courage for once to be candid—that much highly useful collective investigation has been already accomplished by homeopathists; and they would also learn that the way not to discover its curative properties—or the curative properties of any other drug for that matter—is the way adopted by Drs. MARSHALL and Wood.

# NOTES.

## AN HONEST MAN.

We heartily congratulate Dr. Millard, of Edinburgh, on the distinction he has earned for himself among his brethren; and we also congratulate the *British Medical Journal* on departing from the traditional custom of its kind in inserting Dr. Millard's letter. Here it is:—

### "THE TREATMENT OF A FORM OF DIARRHORA.

"Dr. Wm. W. Millard (Edinburgh) writes: I did not obtain my information of the use of hydrag, perchlor, in this form of diarrhoes from Dr. Ringer's excellent work, as Dr. Macdonald perhaps supposes, but from probably the same source that Dr. Ringer obtained his, of which, to any one that knows, the book bears many traces, namely, from homeopathic treatises. But it matters not whence the knowledge comes, I know it to be an excellent remedy in the form of diarrhoea I previously described; if not adopted too late in the case, it is invariably successful. I have lately had four cases to test its merits; two recovered, and two were in a state of almost collapse when seen, one of these dying one hour after my first visit; in the other, the diarrhoea was checked after three or four doses, but the infant, a very weakly child, died from convulsions a few hours afterwards."

This is honest, at any rate; and if all those who borrow, as Dr. Millard does, from the homeopaths would have the courage and honesty to acknowledge it, there would be some hope of seeing the barrier wall between the two schools broken down. Dr. Millard says it does not matter whence the knowledge comes. In this we cannot agree with him. It does matter a great deal, it seems to us, whether this piece of knowledge is an isolated nugget of gold, dropped and found by chance, or whether it is a specimen taken from a rich mine which it is worth Dr. Millard's while to work. But this is merely an error of judgment, and in no way detracts from the credit due to his candour. Dr. Millard has dared to be honest when more highly-placed men than he have proved themselves very cowards.

## THE "LANCET" AND HOMOSOPATHY.

That the Lancet will continue on the same lines as before is pretty evident from a paragraph which appeared the week before the editor's death was announced:—

### "HOMEOPATHY.

"An Old True Blue asks various questions about homoeopathy.

1. What is homoeopathy? That is a poser. There are probably not six homoeopaths in England who would accept the principles of homoeopathy laid down by Hahnemann. Dr. Kidd, who is the most popular leader of the sect, says there are two principles: similia similibus curantur, and contraria contrariis curantur.

2. There is no homoeopathic university in England, nor, so far as we know, in Europe.

3. There is no legal homoeopathic licensing body in England.

4. Homoeopathy is not the best practice according to the best science of the day, but is a fad and a fallacy.

5. The medical profession does not consider it honourable for a member holding a degree from a British university to practise homoeopathy; but the law particularly forbids any examining body or other medical authority to refuse its qualifications to any gentleman on the mere ground of his holding peculiar or exclusive theories of medical practice.

6. There is nothing illegal in homoeopathic dispensaries."

## ALLOPATHIC "HONOUR."

THE grotesque ignorance displayed in the above paragraph is beneath comment; but it is comforting to find from the last two sentences that the "medical profession"—i.e., the allopathic sect: for the writer is speaking like the three immortal tailors of Tooley Street when they described themselves as "we the people of England"—that the allopathic sect of the medical profession is aware of its own impotence, and is

obliged to take its revenge in spiteful misrepresentations and in boycotting. The allopathic ideas of "honour" are of such a peculiar nature that it is, as a general rule, far safer for a self-respecting man to go right in the teeth of them than to follow them. The allopathic sect "do not consider it honourable for a member holding a degree from a British university to practise homeopathy." Foreign graduates and "L. S. A.'s" may, apparently, according to this peculiar code of honour, practise homeopathy without offence. But the same sect considers it entirely honourable on the part of a Brunton or a Ringer to trade on their appropriations from the works of homeopathists, provided they do not acknowledge the source of their "conveyings."

### SURPRISING!

In his address on Medicine in the United States at the Brighton Meeting of the British Medical Association, Dr. Billings made a few remarks on the "State Boards of Health" now being instituted in some of the States, one of their chief functions being to test by examination the capacities of all medical men intending to practise in that State, although they may already possess a medical qualification. Dr. Billings said the chief difficulty in the way of this was, that public opinion would not support any law which could be supposed to injure or condemn in any way homeopathic and eclectic practitioners and their schools. He added:—

"In Illinois this difficulty was surmounted by the arrangement that, of the five physicians on the Board, one should be homoeopathic and one eclectic. The Kansas law, passed last year, goes further in this direction, and provides that appointments must be so made that no school of medicine shall ever furnish a majority of the members of the Board. Much to the surprise of many, the Illinois plan has worked very well; there has been no quarrelling in the Board, and the homoeopathic and eclectic members seem to have upheld quite as high a standard of qualification as their fellow-members. The results of the work in Illinois have been very good. A large number of ignorant charlatans have been forced to leave the State."

The innocence, or the affected innocence, of the passage we have italicised is truly refreshing! Having decided, on the strong ground of pure prejudice, that all homeopaths are unfit for professional intercourse, it is no doubt an astonishing thing to the strictly orthodox soul to find that after all they are honourable men. But the strictly orthodox are not going to change their opinions, or their actions, on the

mere ground of undoubted fact. The external force of public opinion is required to work this miracle. From which we may draw a useful lesson.

## WESTBOROUGH HOMOGOPATHIC HOSPITAL FOR THE INSANE.

The Boston Herald of Sept. 24th devotes three columns of small print to a description of this magnificent building, destined to accommodate 400 insane patients, to be under the care of homeopathic physicians. The Herald enhances the interest of its description with an excellent engraving of the building from the front. The State of Massachusetts has expended on this institution a sum of 330,000 dollars (or £66,000). In our next number we hope to give extracts from the Herald's report of this palatial rival to the famous Middletown Asylum, from which it has obtained a most efficient medical superintendent in the person of Dr. Paine.

### Corrections.

We are indebted to Dr. Meyhoffer for pointing out to us two errors in our report of his speech in the discussion of Dr. Roth's paper, on page 457 of our last issue. Line 17 from the bottom, "girls from six to twelve" should have been "girls from twelve to sixteen;" and "chemosis," the first word of line 13, should, of course, have been "chlorosis." We greatly regret these important slips.

# Tract No. 7.

THE Homoeopathic League is issuing its tracts at the rate of one a month. The seventh of the series is entitled Testimony of Opponents in Favour of Homoeopathy and its Founder, and is as telling as any that have yet appeared. Few even of homoeopathists can be aware of the large amount of such testimony that exists, and nothing could be better than this to put into the hands of opponents. We strongly advise all who have not done so to read it and pass it on. The tract which is to follow is entitled Influence of Homoeopathy on Ordinary Practice.

## "THE MEDICAL TREATMENT OF OUR TIME."

Dr. J. D. HAYWARD's prize essay bearing the above title is already in print, and will be in the hands of the public

almost immediately. It is issued with a preface by Dr. Hughes and an appendix by Mr. G. A. Cross. Altogether it will form a most telling brochure. It is a kind of last "appeal to the unconverted" among the medical men; and if the call should pass unheeded we shall understand the reason—"There are none so deaf as those who won't hear."

# WOMEN NICOTISTS.

THE following item is from an evening contemporary:—

## "Women as Cigarette Smokers.

"'Some of my very best trade,' said a Cincinnati tobacconist recently, 'comes from women. You would be astonished if I gave you names, but it would ruin my business with them. Do they use the tobacco openly? By no means. They all smoke in secret. Often several women assemble at one house, shut out the outside world, and enjoy a regular old-fashioned smoke, just like the men at the club-room. Most of the women smoke only cigarettes; but after a while these are not strong enough, and they must have cigars. One customer in particular I have, a wealthy widow, who would be deeply offended did any gentleman smoke in her presence, and yet I venture to say no boy, man, or woman enjoys a good cigar better than she. Many servant-girls get to loving the weed from seeing their mistresses indulge.'"

## Another Kind of Smoke.

THE Echo (June 8th) is responsible for the following:—
"CURED BY SMOKE.

"The smoke from burning woollen rags is said to have cured, among others, two cases of extremely dangerous wounds—one made by a sewing-machine needle, which broke in a woman's finger after penetrating it. The machine had to be taken to pieces before the needle could be extracted, and one of the needle fragments was found to have been bent almost double against the bone. Another case was from the bite of an angry cat, which tore the flesh from wrist to elbow. The danger of lockjaw and the pain, which in both these cases was extreme, were entirely removed by holding the injured finger and arm over the smoke of woollens burned over the coals. The voucher for this cure says, 'Let woollen rags be held sacred and always at hand.' Perhaps, remarks the Philadelphia Ledger, it might become as favourite a remedy for dog-bite as caustic is. The wound does not heal immediately, but the pain is said to disappear at once, and not to return."

# "THE REVOLUTION IN MEDICINE."

As we announced last month, the present session of the London Homoeopathic Hospital Medical School was opened on the 5th of October by the delivery of the annual Hahne-mannian Oration by Dr. J. H. Clarke. The Bayes Ward of the Hospital was well filled by a most appreciative audience. We give a brief summary of the oration on *The Revolution in Medicine* elsewhere.

## THE ART DISTRIBUTION.

THE walls of the Bayes Ward were tastefully decorated with pictures presented for the art distribution, and at the close of Dr. Clarke's address, Major Vaughan Morgan called the attention of those present—and we hereby take the liberty of calling the attention of our readers—to the distribution which is to take place now very shortly. In another part of our present issue will be found a circular from which the value of the prizes may be judged. It is hoped that a good sum may be raised, and that the Board may feel justified in opening the Bayes Ward for the reception of patients without delay.

# " MATTIB."

Those who have visited the Children's Ward of the Hospital during recent months will not have forgotten the pale face and wasted form of little Mattie. On Saturday morning, October 16th, Mattie's sufferings, so long and so bravely borne, were brought to a close. For weeks past it had been evident to all about her, and also to herself, that the end could not long be delayed. Mattie had no fear. The last day of her life she spent in distributing all her little treasures among her friends and bidding them good-bye—not forgetting her friend Judy, the dog, whom she asked to have placed beside her in the cot. Early in the morning she fell asleep, and at three o'clock, in her sleep, she passed peacefully away.

# ORIGINAL COMMUNICATIONS.

### EPIPHÈGUS IN SICK HEADACHES.

By H. P. HOLMES, M.D., Sycamore, Ill., U.S.

THERE are few things which will more effectually advertise a homocopathic physician in a community than to help a few cases of so-called "sick headache." They are to be found everywhere, and our step-brothers of the old school do not pretend to do anything for them. Consequently the physician who succeeds in making a favourable impression on one of these cases (usually the mother of the family) soon becomes established as the family physician. The fact soon becomes patent that a physician who can handle a sick headache that every one else has failed on must understand his business. I think it a fact generally conceded by our school that sick headache can be handled, and very nicely too, by the proper homocopathic treatment. Such has been my experience, and I claim nothing for my successes except honours for the grand law of homeopathy, and thanks for the good men who have placed so rich a Materia Medica at our disposal.

With this prelude I wish to report my experience with one of our new remedies, Epiphègus Virginiana. This remedy is indicated in that form of sick headache where the trouble is very evidently due to nervous exhaustion or neurasthenia. Its use was first brought to my notice by Dr. Morden in a short article in Boericke and Tafel's Bulletin of January, 1884, page 788. I was struck at once by the remarkable similarity of the provings of this remedy and its indications to a case of sick headache in a lady friend. This lady had for years been a martyr to sick headaches. Almost without exception she would have an attack every time she went from home. Let her go to church—which she did regularly, -go shopping, take a day's visit, entertain company at home, or in fact do anything which called for a little extra or unusual exertion on her part, and the headache was sure to follow. The pain was located in the forehead, there was a blurring of vision, inability to sit up or go about, and great nausea attended by vomiting. A period of rest, like a night's sleep, always dissipated the trouble. Here was a case for experiment which plainly called for Epiphègus. The remedy in the third dilution on discs was sent to her with the directions to take one disc for a dose when the first symptom of headache was felt. Repeat the dose every twenty or thirty minutes until three doses were taken. Then stop and await results. For years this lady had seldom missed having an attack of sick headache once a week, and very frequently several times a week. What was my surprise and delight to hear at the end of two months that every attack had been warded off by taking a few doses of Epiphègus! Added to this was the statement that it had helped every case in which it had been tried, and there were orders for the remedy from three other parties, one of them the bitterest opponent of homeopathy in the community. En passant, I might add, the latter party has twice since ordered a supply of the medicine, and declares they cannot be without the remedy in the house. My friend, who has now used the remedy for over two years, reports that she has had but one attack of sick headache since using the remedy, and that was when she was out of it.

The many orders coming in, and the almost universal good results, make me feel it a duty to help to put the remedy more prominently before the homocopathic profession, and to extend the good work which Dr. Morden has started.

The following are a few facts concerning our new remedy: -It is known as Epiphèque Virginiana (Michaux), Epifague Americanus (Nuttall), Orobanche Virginiana (Linnæus), Beech Drops, Cancer Root, etc. This little plant grows in the rich soil in the beech woods, and, as the name implies, is usually found growing parasitic on the roots of that tree, although it may be found growing away from these trees in the rich compost of decayed beech leaves. About the only thing known of its medical history is concerning its supposed virtues in a cancer powder. This is the only reference made to it in the United States Dispensatory. But were there no other place for it than its use in certain forms of sick headache, it is of enough importance to hold first rank among our homeopathic remedies. From the short series of provings given it by Dr. Morden we find it causes severe pain in fore-head, with fulness; dull heavy pain, becoming more severe; tight feeling of scalp; blurred vision; eyes smart; makes wrong letters and uses wrong words; nausea and general languor; almost constant desire to spit; saliva viscid; worse by rising up and going about, and always better by rest in a supine position and by sleep. The kind of cases in which it proves beneficial are those who bring on the headache by any unusual demand upon the system. Undoubtedly it is the headache of nervous exhaustion, as rest or sleep invariably brings relief. For bilious headaches, or those due to menstrual troubles, it is not reliable, and seldom gives any relief. In the cases of such nature where it has seemed to do some good, I am inclined to think there was an element of nervous exhaustion playing a certain part.

I should be pleased to have the readers of the World give Epiphègus a trial, and report the result. Like our other remedies, it is not a cure-all, and it must be indicated, or no good can be expected from its use. A thorough proving of the remedy is needed, and without doubt it will be valuable in other cases where neurasthenia lurks at the bottom of the

trouble or complicates it.

### NICOTISM.

By Dr. Mossa, of Strasbourg.

In the eleventh volume of the Charité-Annals Professor Dr. Fraentzel, the senior physician of the Charité, that celebrated hospital at Berlin, speaks of several idiopathic diseases of the heart, among which he classes also the affection of the heart consecutive to the abuse of smoking tobacco. The latter consists especially in an accelerated, irregular action of the heart, followed by heavy pains, anxiousness in the præcordial region, dyspnæa, faintness, sleeplessness, etc. searching after the causes producing such an important irregularity of heart's action we shall be speedily informed that patients of this kind are passionate smokers. cigars which they smoke are not even rich in nicotine, but they are strong ones imported from Havannah. During many years, even for twenty years together, these persons may stand out quite well, but by degrees they grow more and more fastidious in the sort of cigars they consume. Once in a day, without another questionable reason, they will be subject to troubles of the heart, so rapidly increasing that the help of a physician is requested. Such an accident happens very seldom to persons who do not smoke veritable Havannahs, although they consume daily of the common cigars an extraordinary number, even to the extent of eighteen a day. The cigarettes excessively consumed pro-

duce also many noxious influences upon the health, but these are of a different nature.

The most part of patients in question are between forty and fifty years of age, seldom under thirty years. Whoever smokes his strong Havannahs, still in his sixtieth year, may tolerate them unmolested until the end of his life. In overlooking the higher classes, to whom the consumption of such cigars is only possible, we come upon the remarkable fact that a great number of persons resign smoking with increasing age. When asked the reason why, they answer us they do not relish now their tobacco, or it does no more good to them; but in fact there is the trouble of the heart, which moved them to give up the smoking. In such a case the patient has found the best remedy without consulting a physician; for the abstinence from smoking suffices almost to cut off the disorder of the heart. cases require other help besides the abstinence. accurate diet, easily digestible meats, avoidance of coffee, a moderate quantity of light beer and wine, little promenades, sojourn in middle-high mountains, and a convenient medication, will contribute to the purpose of recovery, which may be performed in the course of a year; but the person must abstain from the Havannahs.

In other cases, all subjective symptoms disappear under the abstinence from tobacco; the person feels quite well; however, a more or less irregularity in the action of the heart remains behind.

Concerning the noxious agent in smoking, the nicotine contained in tobacco seems not to be the only one; for there are persons who grow sick by a certain sort of cigar directly imported and already manufactured from Havannah, while they tolerate cigars of the same tobacco which are manufactured in Bremen or Hamburg. May we then accuse the nicotine? Finally, the author consoles the passionate smokers, advising them, after a long abstinence from those noxious cigars, the moderate consumption of Havannahs manufactured in Germany. But he states as a fact, from his experience, that patients of this kind give up the smoking for the most part spontaneously, and that these do the best.

Eight cases of angina pectoris caused by the abuse of tobacco are reported by Beau, *Comptes Rendus*, 1862, vol. liv., p. 179; and *Archives Générales*, 1862, vol. ii., p. 122.

# TWO CASES, EACH CURED BY ONE MEDICINE. By Dr. Harmar Smith.

CASE I.—RAPID CURE OF TONSILLITIS BY Hepar Sulph.

Miss E., set. twenty, Guildford, visited August 22nd. Both tonsils red and swollen, with several large white patches of fibrinous deposit; rigors; temp. 99.8°, pulse 100. Acon. 1x and Bell. 1x every two hours in alternation. Evening—pulse 120, temp. 100°. Continue medicines.

23rd.—Great difficulty in swallowing; tonsils almost meet; much external swelling, and tenderness on pressure.

Continue medicines.

24th.—Morning—dysphagia and other subjective symptoms increased; also tumefaction of tonsils and uvula; temp. 100.7°. I had very little hope now that suppuration could be averted. Omit Acon. and Bell., and take Hepar Sulph. 3x, one grain every half-hour. Evening—much the same; temp. 100.2°.

25th.—Redness and swelling decidedly lessened; also pain, difficulty of swallowing, and other subjective symp-

toms. Continue Hepar every hour.

26th.—Further improvement; little difficulty in swallowing; sloughs gone, leaving superficial ulcers; temp. normal.

27th.—Says she feels very well, but still traces of ulcers; tumefaction nearly gone.

30th.—Discharged cured.

This case is an illustration of the common remark that *Hepar Sulph*. either prevents suppuration or mitigates it. Here it clearly did the former.

# CASE II.—IMMEDIATE EFFECT OF Belladonna IN CONVULSIONS.

Mr. L.'s daughter, Guildford, æt. seven, September 1st. Four of the children of this family had been suffering for a day or two from feverish symptoms, with vomiting, and in one case slight convulsive attacks. I subsequently traced these symptoms to defective drainage, but thought at the time they were sickening for small-pox or some other infantile fever. I was sent for, however, in great haste on the above date to see a girl æt. seven. I found she had been perfectly unconscious, and in violent convulsions for half an hour. She had had cold affusion on the head, which I directed to be continued, and a hot sitz bath to be given at the same time. The convulsions and insensibility, however, con-

tinued unabated, with vomiting and diarrhea; temp. 103°. After watching the effect of the above-named treatment for about a quarter of an hour without attempting to give medicine, I managed to introduce a drop of Belladonna  $\phi$  in half a teaspoonful of water between the clenched teeth, when the convulsions ceased as if by a charm, and there was no return of them. The patient remained speechless, however, for some time after the cessation of the convulsions and the return of consciousness.

I visited her four hours afterwards, and found the aphasia gone, and the temperature reduced to 100.4°, and there had been some hours' quiet sleep. The next day the temperature was normal, and she has gradually and per-

fectly recovered.

This case may not be uncommon in the experience of some of my colleagues, but I have no recollection of a parallel one for nearly thirty years, and this was in the case of an infant, when a like result of *Belladonna* astonished a group of poor women who were interested spectators, and myself as well, as I had never seen anything like it in the old school practice which I had only just abandoned.

Sydney Terrace, Guildford, September, 1886.

# SOCIETY'S MEETING.

## BRITISH HOMOEOPATHIC SOCIETY.

First meeting of the session, October 7th, 1886. Dr. Dudgeon in the chair.

Dr. Dudgeon announced that at the next meeting, on the 4th of November, Dr. Cooper would read a paper entitled—

"Typical Examples of the Three Principal Forms of Deafness, with Especial Reference to Treatment."

He then called on Dr. Pope to read his paper on-

### ANTIMONIUM TARTARICUM.

Dr. Pops, after apologising for presenting the members of the Society with a paper of an elementary kind, described the chemical constitution and the methods of preparation of the drug, and then spoke of the provings from which we know its curative properties. He compared with the latter the fruitless experiments of Dr. Ringer. The first symptoms of the tartar-emetic illness, he said, were restlessness followed by chills. There is

no specific type of fever set up, but a febrile state symptomatic of some alteration in internal organs.

The sleep was disturbed by dreams as of incendiary fires. Headache is associated with almost all affections caused by tartar emetic. There are usually depression, despondency, and fear; delirium; loss of consciousness; trembling in head and hands. Both the substance and membranes of the brain are congested, resulting in restlessness and symptoms of delirium tremens, characteristic symptoms being fear, anxiety, and nausea. If the characteristic headache and depression are present the indi-

cations are more clear.

Local effects.—There is a dry bitter taste; the tongue is brown at first, then coated with a silvery white paste; salivation. Appetite appears to be somewhat increased at first, then diminished; there is vomiting of a watery, bitter, sour-smelling liquid; or of a slimy bitter fluid; pressure with distention at stomach. There are cutting and griping pains in the abdomen; diarrhœa; stools thin and watery, always preceded by pain. one case where there was no diarrhosa there was jaundice. Vomiting is caused in various ways, however the drug is introduced. It is supposed to act both directly on the stomach and on the medulla oblongata. It causes a desire for fruit and sour things, and is found in the vomiting of pregnancy and in drunkards when there is this symptom. Arsenic gives rise to a more incessant and painful vomiting; Phosphorus to a painful vomiting of fluid with blood; Kali Bichrom. causes vomiting of a greater quantity of fluid than Antim.- Tart., and more painful. The vomiting of Ipec. is more mucous and is painless; that of Cocculus is attended with vertigo and with cramping pain; that of Apomorphia is without preceding nausea. Petroleum causes long antecedent nausea, and then vomiting of bile and blood.

Though cholera is much simulated by Antim.-Tart. poisonings, the nausea is seldom so pronounced in cholera as in tartaremetic poisoning, and the vomit and stools are different in the two. The medicine is very efficacious in broncho-pneumonia in young children, in typhus and typhoid, and in old persons. In acute cedema of the lungs it is very efficient. In emphysema it

gives great relief.

Skin.—There is itching of the skin, small pimples appear on the inner side of the thighs, bright-red hard pimples and very irritable. In several cases mentioned by Dr. Pope the skin only became affected some time after the disuse of the medicines.

The eruption is at first papular, then pustular. Dr. Nicholls found it in the recent epidemic of small-pox in Montreal of the greatest service, in both simple cases and cases complicated with low pneumonia—the chills proceeding from within outwards being a strong indication.

Any pustular eruption is cured by it. Also experiments have

recently shown that it will serve for inoculation against small-pox instead of vaccination. It has proved also very serviceable in pannus and granular lids as a local application. Dose, 3x and 2x are recommended.

#### DISCUSSION.

Dr. Dungeon said he supposed Dr. Pope would like to have his method of presenting the drug to students discussed as well

as the paper itself.

Dr. Yeldham said he thought the method of presentation was so able that, though the remedy was an old one, he could say for his own part that he had learned much. He uses the drug frequently in stomach affections, especially where there is a loss of appetite, nausea, coated tongue, and prostration. He usually gives it in 3x, and seldom under; by giving it in 2x he has seen it cause nausea. He usually gives five drops of 3x. He had had a case last spring where there was sickness and great prostration, slow pulse and vomiting. After a few doses of Acon., Ant.-Tart. was given; the patient, a woman, was kept on this until the cure was complete. In pneumonia it is a useful remedy. He remembered the time when patients were bled to fainting, and then put under Tartar Emotic. emphysematous patients with acute attacks it is very useful; expectoration becomes copious. In pustular eruptions along the back Tartar Emetic is very useful, and if this does not prove sufficient, Sulphur will usually remove the spots. In syphilitic cases it is also useful.

Dr. CLARKE said he did not think Dr. Pope's method of presenting the drug could be improved upon. He especially commended the introduction of illustrative clinical cases into the lecture. He was much struck by Dr. Pope's description of the eruption of pimples on the inner side of the thighs as caused by the drug, since it exactly paralleled the preliminary eruption that sometimes occurs in small-pox before the usual eruption appears. Dr. Clarke had seen one such case. In this case Ant.-Tart. 3x was given at first, but without visible beneficial effect on the patient. When, however, the 6th dilution was given there was marked improvement. He had given the drug chiefly in the 6th attenuation, and with excellent results. He mentioned the cure by antimonial wine of a case of psoriasis reported by Dr. Spender, of Bath, in the Practitioner, and copied into the Homocopathic World of May last. He had given the drug in the 2x trituration in certain cases with benefit.

Dr. Blake mentioned that some practitioners give this drug for follicular pharyngitis. In nervous vomiting he had seen it do good. In the case of a lady who had a habit of vomiting whenever she went out grain does cured rapidly. In a case of non-development of left side of body, with emphysema, low fever, sweating, hyper-resonance all over chest except at one point, which was normal, she got swiftly well of the emphysema under small doses of *Turtar Emetic*.

Dr. Shackleton said he had tried it in a case of psoriasis without success. The case was an inveterate one, in which most other medicines had failed before *Ant.-Tart*. was given. The drug he regards as one of the most certain in medicine.

Dr. Noble approved of Dr. Pope's method. He had had good success in small-pox, and noticed the slightness of the

irritation in the cases treated with the drug.

Dr. Dyce Brown highly approved the presentment of the drug. He also approved of having a lecture of this kind now. and then read before the Society. Antim.-Tart., as used in bronchial affections, is one of the instances in which both schools are at one. He thought this should appeal to the old school. Sir Andrew Clark in 1879, at Cork, took up the greater part of his time in showing that we knew nothing of medicinal actions, and he added that the most trusted medicines act empirically. He must have known, from the fatal nature of the old antimonial treatment, that in large doses it caused the very things it is now given to cure. Dr. Gairdner, of Glasgow, said openly that it was quite opposite in its curative effects to its physiologi-This is homeopathy. Trousseau and Pideux are equally plainly homeopathic in their remarks. In chronic skin eruptions, especially of the acneous kind, he has found Antim .-Crud. 3 trit. had proved most useful and better than Antim .-Tart.

Dr. BLACKLEY referred to Dr. Pope's method of presenting the drug with unqualified praise. He had used Antim.-Tart. with good effect in impetiginoid eczema. In an epidemic of smallpox in Liverpool he had used the drug, but he could not say that it did much good. He anointed the patients with oil at the same time, and was inclined to attach more importance to this than to the medicine. In bronchial cases he gave the 3x as a rule.

Dr. Dudgeon (in the chair) thought there could not be an improvement in Dr. Pope's method. He had had an experience with the drug which he did not suppose any one else could boast of. When a student he managed to get typhoid fever in Wales, and was treated by a Welsh doctor, who gave solution of tartar emetic. Every dose made him worse, and he told the doctor that the medicine made him feel as if his life was flowing away. The doctor pooh-poohed the idea, and insisted on his going on with it, saying he was getting better. Fortunately the patient had an aunt nursing him, and she determined that he should have no more of the physic. The bottles came and were carefully stowed away, and the patient got well. There is no doubt that tartar emetic is a good remedy especially for the pneumonic

cases usually called typhoid pneumonia. He mentioned the case of an old lady of seventy-seven, suffering from this disease, who had been attended by an allopathic practitioner and two baronets. As these had given her up, the friends thought they would try homeopathy, and accordingly Dr. Dudgeon was called in. In addition to pneumonia she had a bedsore the size of a soup-plate. Dr. Dudgeon gave a most unfavourable prognosis, and only undertook the case on the clear understanding that the patient had been given up by the others. He gave Ant.-Tart., and, to his surprise, she soon got well. An occasional dose of Phosphorus was also given.

Dr. Pope (in reply) said he would be sorry if the idea should be taken away that he recommended the drug in all cases of bronchitis, etc.; it is only in the low types of disease. element of prostration must be very marked. Another point was about the dose. It is only in certain types he mentioned that the dose should be low. He thought we might get a little light on the vexed question of dose from this drug. Our dose ought to bear a distinct relation to the effects. If a large quantity of a drug has to be given to produce an effect for such a condition in disease, the dose should be large. When the effects are rapidly produced, then a smaller dose would be efficient. The slight nervous conditions, slight fever and gastro-enteritis, have been produced by small quantities, and for these a small dose would be appropriate; but in the graver forms of gastro-enteritis and skin affections larger amounts have been required. In small-pox you cannot put much reliance on one experience as a guide for the dose, but it could not be denied, as Dr. Blackley seemed to think, that the drug was curative. Dr. Nicholl's experience was very valuable, and he could not but think it conclusive on that point.

# SPECIAL CORRESPONDENCE.

#### LIVERPOOL.

The Liverpool Homosopathic Medico-Chirurgical Society held its first meeting for the session on October 7th. Dr. Mahony delivered the presidential address, in which he urged the invitation of the local allopathic physicians to the meetings of the Society, the publication of the Society's work and dates of meeting, the formation of a homosopathic medical library in the town, and the institution of a class for the systematic study of the Materia Medica. A discussion followed the paper, and on Dr. Hawkes's proposition a meeting was arranged for Materia Medica study, to take place on Thursdays, between the dates of the Society's ordinary meetings, and the first text-book for study

was chosen—viz., Carroll Dunham's Lectures. The new officers of the Society are Dr. Mahony, president; Dr. John D. Hayward, vice-president; and Dr. Ellis, treasurer and secretary. Papers were announced, several new members proposed, and everything promises a prosperous and useful Session during the coming winter. Efforts are to be made to induce well-disposed

allopaths to join us in the study of the Materia Medica.

The building of the Liverpool Homeopathic Hospital is nearly complete, the furnishing will soon begin, and then arrangements for the opening ceremonies will be considered. Dr. Hayward has been engaged with a provisional committee in drawing up rules and regulations for the management of the institution. There will be no lack of medical support for all departments, and if only lay supporters, of the stamp of Major Vaughan Morgan, can be interested in the undertaking the success of Mr. Tate's gift to the city will be assured. The building is handsome and artistic, and the ventilation arrangements have the approval of Drs. Drysdale and Hayward, authorities on the subject. Several young homeopaths are starting practice in the city, and there can be no doubt that this is one of the benefits Mr. Tate's generosity has already conferred on the neighbourhood.

### STRAY NOTES.

From A Cornish Correspondent.

(The Editor is responsible for the headings of the paragraphs.)

ONLY AMATEUR HOMOSOPATHY IN CORNWALL—VETERINARY PRACTICE.

So far as I am aware there is no medical man practising homeopathy in the county; and I thought I should have to say that in moving from place to place I had not come across any person who believed in the system. Fortunately I happened to stay in the east of Cornwall with two brothers, gentlemen farmers, who have been using homeopathic medicines for some years past both for their families and their cattle, and with good results. One or two other farmers in the neighbourhood have also gone in for veterinary homeopathy. Mr. J. R., the elder brother, told me that a veterinary surgeon in a town in the north-east of the county informed him that several farmers paid him so much a year for his advice, and prescribed homeopathic remedies themselves.

#### ROUGH PRACTICE.

Mr. S. P. B., the younger brother, is not very orthodox about his medicines, for he gets mother tinctures and dilutes them

with ordinary spirits of wine, always using the same measure without being at the trouble to cleanse it. He first drops the medicine into the measure, and then adds the spirits of wine. He did not suppose the medicines would be contaminated. I need not say that his dilutions are not far above the 1x. His supply of medicine is very limited. He has Ruddock's Vade Mocum and Moore's Handy Book. The latter has been well turned over.

### Post hoc, ergo ---.

About ten miles nearer Plymouth than my friends are living, a farmer, one of the principal men of the parish, lost a fat bullock some weeks ago from inflammation of the brain, or something of the kind. His veterinary surgeon advised him to bleed all the rest of the lot. He did so, and no more died. He believes the bleeding saved them! I strongly recommended him to get Lord and Rush's book to consult, but the sum of 15s. is too much money to spend, and homocopathic medicines are too small quantities of physic to give. No one can deny that bleeding and drenching by the urnful are doing something for the money. If cattle die afterwards it leaves the satisfaction in the minds of the believers that all has been done that can be done.

# A RESOLUTION "More Honoured in the Breach than the Observance."

Many times I have resolved in my mind never to give any one homeopathic medicine unless asked to do so; but somehow or other when I see persons suffering and think I may be able to do them good, I cannot refrain from trying my hand to benefit them. You will doubtless laugh at my prescribing, but please remember I am no M.D. I have no books here, and only just a few medicines that I brought for my personal use. If I do wrong in giving medicines, I am doing in a good cause. When one is fully persuaded in one's own mind of the truth of anything it will no doubt afterwards tell on the minds of others with whom one has come in contact.

A young lady, whose parents I knew, was in bed suffering from toothache and could get no rest night or day. Aoon. 3x was the only thing I had that was likely to be of service to her, so I mixed some and sent it to her. She said the medicine did her good, and afterwards recommended a friend who had toothache to call on me for some of the medicine.

A servant to a lady, still farther west, had suffered from head-ache for years. I happened to have Sang. 3, which I thought the right thing, and I gave her several pilules to take. On my return a fortnight afterwards she said the pilules did her good, but she had been otherwise unwell and had to take other

medicines. When I left I gave her an additional supply of pilules, but I do not know what effect they have had. The lady's husband is a well-read man and well up in most things. He used to laugh at homosopathy. Before I left he asked me if I really believed in it. I have sent him the League tracts.

I recommended the mother of a young woman, not many miles from Plymouth, to go there to see a doctor, assuring her that the distressing headaches could be palliated if they could not be cured. I got a bottle of Ign. 1x for a lady who often suffers from nervous headaches. The medicine did her a great deal of good, and she asked me to procure a text-book for her. When much out of sorts I advised her to see a medical man at Plymouth instead of her old doctor.

#### REDRUTH.

Redruth is the only place in Cornwall that I know where any homeopathic medicines are sold. Only a few are kept by a chemist, and half of his little stock is yellow with age. He told me the medicines are not worth keeping for sale.

### MEDICINAL AGGRAVATIONS.

Mr. W. M., over seventy years old, has been suffering from indigestion and its consequences for about forty years. Having lived with my father when I was a lad, I went to see him on my return to England. He poured out an account of his complaints to me-indigestion; chronic bronchitis; burning sensation in the chest; cough at night, with difficulty of raising the phlegm, obliging him to get out of bed; intolerable itching of the skin at night, especially about the back, but no eruption. He has consulted a great many doctors; and the local medical man, he said, would at one time take an interest in him and attend him free of charge, but all the medicines he ever took never did him any good. He said he would take no more. About thirty-five years ago he went to Dr. Fox, a homosopath at Plymouth, but his medicines made him worse. I at once thought of Ars.-A. as likely to palliate his sufferings, and begged him as an old friend to try it. He reluctantly consented, and I gave him the bottle, 3x, telling him to take two-drop doses four times a day. After waiting a day or two I called on him again. "Well," I said, "how are you now?" "Ah, my dear fellow," he spoke with great earnestness, "your medicine tore me to pieces. It made my chest burn like fire; gave me spasms and diarrhosa. Oh, I have now a spasm right down my body, but perhaps this medicine is beginning to do me good, and I will continue it!" Of course I told him to leave off the medicine, but to oblige me by trying some less strong. I got him a bottle of pilules, Ars. 6, from Plymouth, and told him to take two at a time four times a day, or one if he thought advisable. The next time I saw him

I was surprised to find that the pilules acted just the same as the tincture had done. I said, "It must be impossible, you have been eating or drinking something that has upset you." "Oh, no, no!" he said, "it is the medicine. Did I not tell you I could not take what a baby could?" "Well," I said, "look here, get me a tumblerful of rain water, and we will try again, and surely you will not say this medicine is too strong." I put two pilules in the tumbler of water, and well mixed them, and told him to take a teaspoonful four times a day. After waiting a day or two to see the result, he persisted in assuring me that the medicine acted the same as the other, and that he would take no more. It struck me that Dr. Fox gave Ars., and had no chance of following it up in high dilutions. I mentioned the effect of the medicine to the chemist. He said he had known 3x produce aggravations, but 6 could not effect anything of the kind. He had no higher dilutions at hand, and I was about to leave the neighbourhood. This would have been an interesting case for a high dilution under medical supervision.1

### PLENTY OF ARSENIC.

But here is another strange thing about arsenic from the opposite direction. When at Redruth, my brother-in-law, a purser of mines, took me to see arsenic burning in flues. He opened some doors of the flues, and a quantity of fumes cameout. Men enter these flues and sweep down the arsenic (using certain precautions, of course), and he told me there was rarely any one injured by working the arsenic, so far as he knew. He showed me two heaps of arsenic close by the works, containing about 95 per cent. pure arsenic, worth then about £6 13s. a ton. One heap under a shed weighed sixty-five tons, and the other in the open weighed fifty tons. Any person could have carried away a pound or two of arsenic as easily as he could a pound or two of earth. Yet no one has been poisoned. Perhaps the people there would consider it just as necessary to rail off the sea to prevent persons from drowning themselves, as to fence off the mine to prevent persons from using arsenic to commit suicide.

A friend in the upper part of Cornwall informs me that the health of some of the men working arsenic there has been

¹ We much suspect that this patient was suffering from the effects of Arsenic already. We have seen cases in which a dose in high dilution has antidoted the effects of the same drug in the crude state; but we have also seen very dangerous results follow the administration of a dilution under such circumstances. In an article on "Rhus and Rhus poisonings" in the Homeopathic Recorder for July there are interesting observations bearing on this point. The writer, "A. J. T.," gave a high dilution of Rhus in several cases of Rhus poisoning with signal success; but in another year on repeating the treatment in other patients there was no success at all.—Ed. H. W.



injured. Likely enough the same precautions were not used as in the west.

#### OLIVE OIL FOR WOUNDS.

I think I remember reading in the *Homzopathic World* that some eminent man has said that clive oil is the best thing possible for dressing wounds. My aged father (in his eighty-seventh year) had a wound in his leg about six inches long, some of the flesh came off with gangrene, and the tendon cord was laid open at least  $5\frac{1}{2}$  inches. Nothing but clive oil was applied to aid nature, which has now done the work of healing, to the astonishment of his medical attendant and of course of every one else who saw it.

### MORE LIGHT!

Almost all I have spoken to in Cornwall about homeopathy (and I may say in other places also) know little or nothing about it. If the medicines had been given in more bulk it would perhaps have prevented a good deal of prejudice. persons suppose that because the quantity of medicine administered is so small the medicine must be very strong, and should be used with great caution. A lady told me she had used Acon. for her children and found it highly beneficial, but she was now afraid to give any more because she had of late read of so many cases of poisoning by that drug. Others who know that the quantity of medicine is minute say that it is useless and harmless—they could take it by the bottle without suffering anything from it. A medical man who sells homocopathic medicine in his shop said to me, "How strong the medicines must be!" When I explained about the strength of the dilutions, he said, laughing, "What good could that do? I should not like to trust to that." A layman, or even a homeopathic chemist, has great disadvantage in recommending medicine unless the person happens to believe in homeopathy, or is at hand to follow up the medicine. A person for instance goes to a homeopathic chemist, states his case, and gets a bottle of medicine. The single remedy may be effective, as it no doubt often is; but it may not be. The person takes perhaps a good deal of the medicine, likely enough without any precautions whatever, and is no better. He pronounces homoeopathy to be useless, takes purgatives, or goes to an allopath, and is set right. After that the individual states with the utmost assurance that he has tried homocopathy and found it to be no good whatever. When a purgative is taken there is a definite result; but if homosopathic medicine is used no violent effects are produced, and if the patient becomes better, nature is said to do the work, and the drug is valueless. I have found people who begin to try homeopathy most unreasonable in their expectations.

Many times I have given a medicine for severe pain, and if it had been regularly taken I am sure good results would have been produced; but the medicine not giving relief just as soon as the first dose was swallowed, it was discontinued, and old-fashioned remedies were resorted to and continued for hours, and perhaps days, with implicit faith. Then if these well-known remedies failed nothing more would do good! The mode of administering homoeopathic medicine was never intended to deceive wise men or to befool fools.

I have done what I could for homosopathy in the West. Many of my friends no doubt think that I have homosopathy on the brain. Possibly they are right to a certain extent. If I have, the *Homosopathic World* has prompted me on, and I hope now the worthy editor will look upon my scribbling with friendly com-

passion.

## INSTITUTIONS.

# LONDON HOMŒOPATHIC HOSPITAL MEDICAL SCHOOL.

### HAHNEMANNIAN ORATION.

On the 5th of October the present session of the London Homospathic Hospital Medical School was formally opened by Dr. Clarke with the annual Hahnemannian Lecture. The Bayes Ward was filled to its utmost extent, and the audience followed the lecturer with close attention throughout. Dr. Clarke took for his subject The Revolution in Medicine. The following report is from the Morning Advertiser of October 6th:—

The lecturer commenced by remarking that a hundred years ago the art of medicine had not emerged from the dark ages, but that its professors wandered about in a fog of theory and conjecture with no guide but blind tradition and nothing to worship but the fetich Authority. He then sketched the character and training of Hahnemann, holding that he was in every way fitted to inaugurate the much-needed revolution. He had made himself eminent in all the arts and sciences connected with medicine, and was a recognised authority in them, and a man of mature years before he made his great discovery. The sad condition of medical practice so disheartened him that at one time he gave it up in despair, and earned a bare living by literary work rather than live by killing his patients secundum artem. was during this period that "the light" came to him. He was translating an English work by Dr. Cullen into German, and, being dissatisfied with Cullen's explanation of the action of Peruvian bark in ague, he took a dose to see what effect it would have on himself in health, when lo! an attack of chills and fever

Following up this hint, Hahnemann found that there was a definite relation between the action of a drug on the healthy and its action on the sick, and that if he knew the one he could predict the other. This discovery restored Hahnemann to hope and life, and to medical practice. But he worked at the subject for six years before he published his conclusions in Hufeland's Journal, then the chief medical journal in the world. Hahnemann violently attacked the prevalent practices of bloodletting and of giving large numbers of drugs in one mixture, and he proved that they were wrong by the great superiority of his own results. Gradually the storm of persecution arose, and at the age sixty-five, in 1819, he was driven into exile. But his work was then to a large extent complete, and able to take care of itself. He had many enthusiastic followers. He had also unexpected allies in the shape of epidemics of fever, which played great havor with those under old-school doctors, but spared those under homeopathy. The cholera afterwards did much to establish homeopathy, as the homeopathic statistics in this disease, officially witnessed by allopathic physicians, were incontestably superior to the allopathic. Dr. Clarke traced the indirect influence of Hahnemann's work, and ridiculed the attempts that had been made to rob him of his due credit. He concluded by showing that the "revolution" inaugurated by Hahnemann was not yet complete; that the persecutors of Hahnemann had their representatives in medical boycotters at the present day; that allopathic professors pointed their students to experiments on animals as the only source of progress in the art of prescribing, whilst they were compelled to satisfy their therapeutic cravings with "a dish of crumbs furtively swept from Hahnemann's floor;" and that students had great pressure put upon them to hinder them from studying homocopathy. Having referred to the work of the Homosopathic Hospital and Medical School, he said-"Our work is for truth and justice and light. To all who love justice and are not afraid of truth we look for help in our endeayour to break down what still remains of the tyranny of darkness in medicine, and to hasten the coming of the perfect day of liberty and light."

The lecture was very well received and loudly applauded at

ts close. It will shortly be published in extenso.

### HOMCOPATHIC HOSPITAL.

WE have received the following from the secretary of the London Homoeopathic Hospital, Great Ormond Street, Bloomsbury, for publication:—

"FINE ART DISTRIBUTION, 1886.

"In the programme of the recent bazaar, the Board of Man-

agement of the Hospital announced that the concluding effort in connection with the endeavour to raise a sum of money to maintain the new ward for men would take the form of a Fine Art Distribution. It was felt that so generous has already been the liberality of the friends of the Hospital in their gifts that an enterprise of such a kind, where the prizes to be distributed would, in all probability, greatly exceed in total value the amount subscribed for tickets, would not be unappreciated. Such proved to be the case on a former occasion, when the subscriptions amounted to £1,000 and the prizes to an equal

"For the present art distribution, oil-paintings, water-colour paintings, etchings, photographs, china paintings, statuary, plate, tapestry, jewellery, and other works of art have been freely contributed, and these have been assessed by a competent committee to have a total value of £800. Many other valuable pictures are also promised. The accompanying catalogue will show that many artists of reputation have contributed, and among them are Sir James D. Linton (President of the Royal Institute of Painters in Water Colours), T. Oldham Barlow, R.A., Arthur Croft, Charles Jones, Samuel Bird, E. H. Holder, Charles Thorneley, Harry Dixon, Albert Edward, Tristam Ellis, W. H. Wheeler, Annie Wheeler, John Absolon, Gustave Doré, Robert Macbeth, A.R.A., and Ernest Parton, while others equally eminent are expected to contribute.

"All the paintings and other works of art have been most generously presented to the Hospital for this Fine Art Distribution either by the artists or by liberal friends. Therefore the entire benefit of the subscriptions received will go to the maintenance of the new ward and the additional men patients; while, on the other hand, the subscribers to the distribution will have a fair probability of securing in return a picture, or other work of art, assessed at a value much higher than the amount of their subscriptions. Each subscriber of one guinea will be entitled to one chance of a prize, or a consolation prize of some work of art suitable for framing, while those who subscribe £5 will be entitled to six guinea tickets, and naturally having an excellent chance of securing one or two really desirable or

valuable prizes.

"The value of the highest prize is 100 guineas, there is one prize of 50 guineas, two prizes of 40 guineas, one of 35 guineas, two of 25 guineas, six of 20 guineas, sixteen between 20 guineas and 10 guineas, twenty-six between 10 guineas and 5 guineas. and sixty-six between 5 guineas and 1 guinea. The prize of 100 guineas is promised from Sir J. D. Linton, Bart. Reckoning this, the total value is over £800, and the total number of prizes 150, with many consolation prizes in addition.

"Every ticket will entitle to either a substantial prize or a

consolation prize, the latter consisting of approved etchings, photographs, etc., in each case well worthy of framing. Already subscriptions to the amount of 150 guineas have been taken up, and it is hoped that many friends of the Hospital will adopt this means of maintaining its increased work.

"The drawing is arranged to take place in December, and an early response on the part of the friends of the Hospital will

greatly facilitate the arrangements.

"The tickets are one guinea each, or books of six for £5.

"In conclusion, the Board take this opportunity to express their deep sense of the ready, cordial, and generous response which their recent appeals have met with from the friends of homeopathy, who have, by generous contributions, lightened their responsibilities and anxieties, have demonstrated that the homeopathic science is not a thing of the past, have placed it in the power of the Board to increase year by year the work of this charity among the sick and needy poor, and, in so doing, to spread over a wide area the knowledge of the truths of homeopathy, and to develop the influence and power for good of the Hospital.

"October, 1886."

"G. A. Cross, Secretary."

The following, among others, have subscribed for books of six tickets:—

Mrs. Adelman.
Major-General Beynon.
Miss Barton.
Bertram Barton, Esq.
Alan E. Chambre, Esq.
Eugene Collins, Esq.

C. Fisher, Esq. Mrs. Heaton. R. P. Harding, Esq. Mrs. W. V. Morgan. James Slater, Esq.

## TRANSACTIONS OF THE HOMEOPATHIC PHARMA-CEUTIC ASSOCIATION OF GREAT BRITAIN.

WE give the following extracts from the address of the President at the late meeting in Cheltenham (August 24th), and regret that our space will not permit us to publish it in full:—

"Gentlemen,—Ever since my election to the office I now occupy, I have been deeply sensible of my own unfitness for a post of so much distinction and responsibility; and when I call to mind the able men who have preceded me in this chair, and see around me so many persons much better qualified for the office than myself, I feel the difficulty of addressing you from this position. At the same time, I fully appreciate the compliment you have paid me, and rely confidently upon the same kindly feeling for support and forbearance in the discharge of the duties of this chair which I have been so highly favoured with before.

"We come together this evening in the full hope and confidence that the success and presperity which have attended our gatherings during the past few years will not be less in the present session of

the Homosopathic Pharmaceutic Association, the seventeenth since its foundation.

"We, as pharmacists, occupy the same position in regard to the physician as the cutler does to the surgeon. The success of the surgeon in operating cannot be ensured unless his instruments are perfect. The physician is equally dependent on the pharmacist for his carefully-prepared and elaborated preparations, without which his treatment must fail. That the pharmacist may be capable of discharging these functions aright, he must be something more than a mere pharmacist; he must be a pharmacologist, and devote to the prosecution of the study of pharmacology no inconsiderable portion of his time. It is not sufficient that he may be able to vend drugs, nor is it enough that he can recognise readily all the members of the Materia Medica; a deeper knowledge is required, he must be a proficient pharmacologist.

"The pharmacist's calling, I have said, is twofold in its nature, partly professional and partly commercial; he is, in every sense, a professional man, and he is equally a business man. In the latter capacity, the pharmacist is forced to consider some difficult questions. These are perplexing times for him. Pharmaceutical education and examination have advanced with the times, and reach today a greater state of thoroughness and perfection than at any previous period. The pharmacist has to comply with a rigorous course of study, and present himself for searching examination at the hands of able scientists and pharmacists. And he has to deal in the exercise of his daily duties with an educated public, many of whom are conversant with chemistry, and botany, and other scientific subjects. So we see that a pharmacist in 1886 pursues his calling under entirely changed conditions from those which existed fifty years ago. Then there were no exams.; the pharmacist exercised his functions as he listed, and knew no rule for the conduct of his chemical operations, save the rule of thumb. Now there are examinations, and the practice of pharmacy can only be carried on by men who have acquired certain knowledge, and proved themselves to be capable pharmacists and chemists. In earlier days chemistry was enshrined in a halo of mystery, whose weird and uncanny darkness prudent folks declined to penetrate. To-day chemistry is taught in elementary schools, and has been totally divested of its supernatural character. The public are familiar with its laws and principles, and its professors are no longer regarded as magicians, to be feared and conciliated, but as exponents of a science which of all others has been most beneficent to man-

"But what has this to do with the pharmacist? Well, it has quite changed his position in relation to the public. That of which he was sole custodian is now common property. The friendly shades of mystery into which our pharmaceutical forefathers could withdraw when occasion required have been dissipated by the clear strong light of nineteenth century education, and familiarity has bred, if not contempt, at least decreased respect.



"Before closing these remarks, permit me to make a more general reference. Any separate action we may take as homeopathic pharmacists, in the way of bringing pressure to bear on the Government, is liable to the objection that we are seeking personal advantage. That is no reason for inaction on our part, when we are able to show that our advantage is also that of the community. But undoubtedly we shall make more rapid progress with our beneficent mission if we are able to obtain the sympathy and co-operation of the general public. It is very satisfactory to know that means are about to be

taken to secure this important object.

"It is proposed to form a Homocopathic League which shall include all persons, whether lay or professional, who recognise the importance of the great medical reform introduced by Hahnemann. The promoters of this League have taken note that homoeopathy, while it has made steady advances in public favour from its beginning to the present time, has not progressed in the same rapid ratio of late years as when, at the first, it had the benefit of full public discussion. The policy of our opponents is to prevent, by all the means in their power, the presentation of our rational methods of cure, either in the field of literature, or in hospital or dispensary practice. Any notice they deign to give us is misrepresenting and contemptuous. It is time that we should again secure for ourselves the opportunity of appealing to a more impartial tribunal—that of the great body of the people. The League proposes to do this by the circulation of books and pamphlets, by popular. lectures and public meetings, and any other methods which may be found expedient. I have no doubt that these means, which, when tried before, were found so successful, will be not less efficacious now; and I trust that the members of our Homeopathic Pharmaceutic Association will be ready to assist, to the utmost of their power, in the formation of this promising League, and the promotion of its objects."

## DIETETICS.

A FEW WORDS ON THE DIET-TREATMENT OF GOUT.

By John Kent Spender, M.D. Lond., Physician to the Mineral Water Hospital, Bath.

(From the "Practitioner" for May.)

THE food and fuel required by that physiological edifice called the human body, may be calculated with absolute precision. Given a specific bulk of body, and so much tissue-forming stuff must be provided; given a certain expenditure of vital energy, and we can estimate the quantity of fuel necessary to its production. The conditions of the problem vary with the varying elements of rest, motion, and a number of other physical surroundings; but not one of these is so potential as that dynamic disturbance which we call Disease. In this state

new powers are roused to battle, new agents of destruction fight for mastery, and assaults are made on purity of blood and strength of nerve. Happy are the nerves and blood which can resist them; but this resistance may be helped and guided by

medical art, when the ordinary resources of Nature fail.

Now although the idea of diet has a domestic flavour about it, and raises homely associations of the housewife and the cook, it is in a deep and true sense medical nutrition or medical prohibition, according as we give or withhold. Gout, for instance, is a diathetic wave which alters and at length impoverishes blood; this is susceptible of absolute proof, and justifies us in asserting the controlling influence of the amount and quality of the food. Every acute disease which has a complementary chronic form passes to that degree out of the reach of mere pharmaceutical drugging, and comes more within the domain of therapeutic dietary and hygiene. The tradition has scarcely ever been contradicted that gout is the type of a blood-disorder; whatever feeds the blood with certain things feeds gout; whatever cleanses the blood of certain things prevents gout. The disease may be so born with the system, or may so cling to it, as to defy all purifying processes; but our medical duty is clear unless the science of physiological chemistry is a baseless fiction.

It is very disturbing, therefore, when two of our masters and teachers utter dogmas which are in actual opposition; so that it is not only impossible to obey both, but to fight for the one creed is to fight against the other. Says one master-"Bile-poison and gout-poison are the avenging fates of a dietary too rich in albuminoids. Gout is a malady due to excess of albuminoid waste. In the treatment of biliousness and gout alike, it is essential to cut down the albuminoid elements of the food to the minimum of tissue wants." But another doctor steps in and announces with an air of equal authority that he makes "no attempt to control the patient's diet;" that he allows a "free use of sugar" and a "liberal use of meat;" and that during even an acute paroxysm of gout he orders a generous supply of strong beef tea, well made mutton broth, or good meat soup, with light wine and perhaps dry champagne. Brave, prodigal words! What brightness and cheer to the many poor gouty creatures now kept in darkness and starvation! But when we have recovered from the pleasant shock which all paradoxes cause, we ask ourselves in the quiet seclusion of the study—is all this news true? And if true, why have we never heard it before? And when the prophets prophesy such clashing notes, where is the real and right oracle to be found?

Our present inquiry concerns a disease not buried in obscure corners and by-ways, but known and suffered by many people.

So common is it in England that the difficulty would be to discover any large family quite free from gouty contamination. In country mansions and town hospitals acute gout is plentifully seen, and clustering about our thermal spas may be found any quantity of old gout in its medico-chirurgical phase. material for observation and dietetic experiment is almost bewilderingly large. And yet the very alphabet of the domestic treatment of gout is now called in question. The laity may well mock us with their gay criticism, for now it is not merely "doctors differing," but philosophers contending. Wherefore this halting and indecision? The living blood and nerves are what we have to study. To formulate this or that solely according to the bare frigid moonlight of chemical symbols, is not the art of Human Medicine. Away from the bedside, the science of retorts and weights and measures lacks one thing needfulbiological warmth and colour. Apart from clinical experience, the physiology of the laboratory is like Ariosto's famous horse, whose ancestry and form were beyond reproach; but it had one grave fault—it was dead!

The plain question must be asked—Is it better for a ship to have two pilots, each advising a different course, or no pilot at all? Better, certainly, no pilot at all; the crew are not stupid or unlearned; they can frame a chart for themselves if their "superior officers" cannot agree about one. We are waiting for some authoritative words of command. And if neither rudder, nor compass, nor sail be provided for us, we must con-

struct these implements of navigation for ourselves.

Some news has been lately published concerning gout, which rekindles interest in what was becoming a stale and unprofitable subject. For some years there has been a craving in the professional mind for fresh ideas on the living pathology of gout; as the established doctrines did not completely explain all the known phenomena. Since Dr. Garrod's epoch-making discovery was announced in 1859, we have been travelling rather drearily backwards and forwards over the same ground. I wish to communicate to others the pleasure I have felt in reading a book written in 1844 by Dr. Ebstein, on the "Regimen to be adopted in cases of Gout;" accessible to English readers in a pleasing translation by Dr. Scott, of Manchester. Seldom has such weighty matter been put into so small a volume. Every medical man should study Dr. Ebstein's work, whether he cares for gout much or little; his general views will be strengthened and enlarged; and the conceptions of his duty as a therapeutist will become more precise and firm. Dr. Ebstein maintains that uric acid is a chemical poison, which may cause (not merely inflammatory, but) necrotic processes in animal tissues. The formation of these foci of necrosing and necrosed elements follows directly from the fluid parenchyma being exceedingly

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chosen quarries.

rich in neutral urate of sodium, and stagnating in the affected parts. The separation of crystallised urates is the secondary process, and follows only after the tissue has been completely destroyed by the uric acid. Through this local necrosis an acid reaction follows in the affected tissues, in which the neutral and easily soluble uric acid combinations circulating in the blood are changed into the less soluble acid salts of uric acid, or even uric acid itself. The reactive inflammation around the typical gouty foci completes the clinical picture as we ordinarily see it. All these facts are expressed by the brief formula, a limited retention in definite parts of the body of the fluids overladen with uric acid combinations. Such are the outlines of a thesis which Ebstein defends with originality and ability, and which is full of wholesome and beneficent fruit. On one pathological point it is desirable to make Ebstein's views quite clear. He believes that in most cases the gouty process may be developed and continue for a long time, without the parenchyma of the kidneys being materially injured or hindered in the exercise of its regular healthy functions. But it is admitted that there is a form of gout in which severe impairment of the kidneys is the startingpoint of the gouty process, and this might be styled primary kidney gout.

There is, then, a peculiar disposition of tissue-change which we may if we please denominate the gouty diathesis. Uric acid is the cause of the disease, not its consequence: but the increased formation of uric acid does not by itself constitute gout. The speciality of gout is that, as the result of a predisposition hereditary or acquired, uric acid is produced in the muscles and in the medulla of the bones. We cannot eradicate the disposition or diathesis that lies at the bottom of uric acid gout; but if we try to reduce uric acid formation in general we may do something to check its deposit in unusual parts of the body. This is the philosophical basis of the diet-treatment of gout; this is the determining force of our endeavour to regulate the quantity and quality of the food according to definite laws. Our constructive material should be hewn only out of well-

Before drawing out any rules, there are a few questions which may be criticised with advantage. There is such a large balance of opinion on certain points, that we are relieved from the necessity of discussing them. For instance, flesh food is best taken in (so to speak) a diluted form: not as the cooked muscle of grazing quadrupeds, but as boiled poultry and white fish. There is a chemical fitness in this which is incontestable. The tales of so-called vegetarians are pretty physiological experiments, but nothing else; for man was not designed to live on herbs alone. The principle of a mixed diet, then, being conceded, we come to a subject which has been much debated—the

use of the animal hydrocarbons, or fats. There is no valid reason of any kind for the prohibition of fatty foods. If the albuminates are taken only in the mild forms of fish and bird, so much the more ought butter and cream and their allies to be prescribed in no sparing way. These things are good tissue-material, and are really needed. They do not increase the secretion of uric acid; they help digestion in an obvious manner; and they not only satisfy the appetite, but enable a gouty person to do more mental and bodily work. On the other hand, the carbo-hydrates, or starches and sugars (found almost entirely in vegetable products), are not only comparatively useless, but often hurtful. They cause dyspepsia, and may impede the digestion of genuine foods. And yet it must not be hastily said that the body can do without sugar entirely. One of its offices appears to be "to supply fuel-light fuel, burnt up more quickly and of less heat and force-producing power than the concentrated combustible fat. The carbo-hydrates do not enter into the structure of any part directly; but the excess not used at the time is converted into fat, and stored up in reserve."2

"Diabetes in relation to Arthritism" is the title of a paper by Dr. Dyce Duckworth in a recent number of Saint Bartholomew's Hospital Reports, which is valuable in itself, and contains an interesting summary of the many links that bind together gout and glycosuria. These morbid states are capable of transformation; they may glide into each other, and cause mingling and modifications which can scarcely be identified or separated.

Dr. Ord calls this form of diabetes "gout of the liver." A perverted vital chemistry brings about (through a subtle nerve influence) an imperfect assimilation of food, which is common to gout and to saccharine diabetes. From this an argument is deduced in favour of the "unity of the original malady." The nerve origin of diabetes and the "tropho-neurosis" theory of gout are supported by clinical facts which suggest a pathological kinship, and the possibility of therapeutic control by similar methods. And if a larger inquiry proves this relation, there will be another and cogent reason for the restrictions associated with the diet-treatment of gout.

In studying the diathetic vagaries of the human body, it becomes us never to forget the *patient*—the "organic aggregate" in whom is planted for a while the undisciplined thing called

<sup>&</sup>lt;sup>1</sup> Dr. M. Fothergill reminds us that the so-alled "blliousness" comes from the imperfect oxidation of albuminoid surplusage. (Food for the Invalid, p. 7.)

<sup>&</sup>lt;sup>2</sup> Dr. Cheadle in the Book of Health, p. 638. But Dr. Latham says that "gout is prevented by a diet largely farinaceous." Sir W. Roberts has observed that there are problems in dietetics apparently beyond scientific research, and this probably partly explains the conflicting verba magistrorum. But the learned and laborious research embodied in Dr. Latham's "Croonian Lectures" will be thankfully received by the whole profession.

Disease. Plenty of warnings on this point are addressed to us as unripe learners; and it is really possible to slay the sick (or at any rate to put him in danger) by clumsy efforts to subdue his malady. The physician who has the practical insight of his craft will in a very few minutes gauge a patient's vital capacity, and take a fairly accurate measure of textural degeneration, arterial tension, and general nerve tone. To label a case as gout, and to treat it by arbitrary rules framed out of text-books and hospital reports, shows a mental resource phenomenally poor and narrow. Treat the man first, and the gout afterwards; or, in other words, think of gout as a human quality, not merely a chemical perversion of so much blood and tissue. The man and the disease are so mixed together that unless we knew the man before the disease came, we may mistake the proportions in which a bad constitution brought the gout, or the gout caused a bad constitution. From the standpoint of this paper, the judicial functions of diagnosis and prognosis are presumed to have been fulfilled. They lie outside the present discussion. The place which our patient holds in the nosological class-list having been determined, he leaves his destiny in our hands, and . regards us as the lenient arbiters of his drugs and his food. Let us approach him with a kind and intelligent interest, and he will receive our instructions on the daily diet-table with gratitude and a vow of loyal obedience.

Our code of ordinances should begin by acknowledging that although gout is often hereditary, it may be helped or hindered in most cases by careful management of the general health. It is cheering to be able to say that gout may now and then be

entirely extinguished.

The first point of importance is a strict limitation in the quantity of the food. As Ebstein says, the gouty patient stands in the front rank of those who must cease to eat as soon as the first feeling of satisfaction comes on. The food should be so prepared as to give the stomach as little trouble as possible; and within a definite range, the dietary should vary in quality and mode of cooking. No plan of diet ought to be adopted which causes bodily weakness, as gout is never cured or prevented by starvation.

The breakfast should consist of weak tea with plenty of milk or a little cream, crisp toasted bread, and a fair allowance of butter and cold boiled bacon. Small slices of fried bacon are not injurious, if the lean part be put aside. Eggs are best boiled, rather "underdone," and only the yolk should be eaten. Sugar must be taken very sparingly, as well as all substances which are easily transformed in the system into sugar, as arrow-root, rice, sago, tapioca.

An early dinner is preferable. Mutton, white fish, poultry, and game are usually harmless; nearly every vegetable which

is in season may be permitted, if properly dressed; but potatoes only in a small quantity. When the gouty paroxysms are frequent and severe, butchers' meat should be forbidden for several weeks, or even months. Meat which has been twice cooked is always indigestible. Any light pudding of milk, eggs, and flour may be allowed. Of condiments or "relishes," only that quantity should be taken which is absolutely necessary to make the food palatable. Fresh cherries, strawberries, and grapes are wholesome, and so are baked or stewed apples and pears.

An early evening meal may include cold chicken or a little sweetbread, with cocoatina and milk. Oatmeal porridge makes a nourishing supper. As a rule, alcohol helps the development of gout; and robust persons with a strong gouty tendency ought to be "total abstainers." But in gout (as in all other diseases) the prescription of alcohol may become a necessity, in order to save a patient from greater evils. A weak person suffering from asthenic gout may be improved in health by a daily ration of mild wine, diluted with an aërated alkaline water. All spirits are dietetic poisons, whether diluted or not.

Tobacco smoking contaminates the blood just when we desire

to keep it most pure.

(To be continued.)

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## REVIEWS.

### CYCLOPÆDIA OF DRUG PATHOGENESY.1

The issue of the fourth part of the Cyclopedia completes the first volume of the work, and brings us down to Cannabis Indica. It is a matter for congratulation both to the compilers and readers that the work is being carried on so swiftly and steadily. The medicines here presented appear to be thoroughly well done; but the parts which are perhaps of the greatest interest are the Introduction and the Appendix. A commendably short preface makes due acknowledgments to the chief workers, and regrets to record the loss of a member of the Consultative Committee, the lamented Dr. E. A. Farrington, of the United States. The Introduction sets forth concisely the history, the necessity, the method, and the scope of the work.

We are glad to find, on referring to the Appendix, that the suggestions and criticisms made in this journal last year have been taken by the editors as we hoped they should be taken, and that the omissions of which we complained have been

<sup>&</sup>lt;sup>1</sup> A Cyclopædia of Drug Pathogenesy. Edited by R. Hughes, M.D., and J. P. Dake, M.D. Part IV. Berberis—Cannabis. London: Gould and Son. New York: Boericke and Tafel.

supplied. In two notes apropos of appended matter the editors make the following remarks:—

"In our expansions, etc., of the presentation of this [Acid. Acetic.] and the two following medicines [Acid. Benz. and Acid. Carbol.] we have been much influenced by the suggestions made by Dr. Berridge and by the Editor of the Homeopathic World for 1885. Where they have not been adopted, we beg our colleagues to believe that it has not been for want of due consideration."

#### And-

"It was upon this drug [Acid. Carbol.] that we first tried our 'prentice han' ' (see M. H. Rev., April, 1883), and in our zeal we went further than we have ever gone since. We have therefore given above a less abbreviated presentation of some of its provings."

We are happy to be able to accept fully these explanations, and to say that, so far as we are able to judge, the later condensing has been done more sparingly and more judiciously than that to which we took exception.

We will conclude this notice by quoting the closing words of the Introduction:—

"For the student, then—whether one actually in statu pupillars or one become such by the necessity of learning the fresh therapeutics of homeopathy—for the student this work is primarily designed. For him we trust that it will supersede altogether the dreary symptom-lists with which he has so long been burdened. To the practitioner it does not so obviously appeal, and he must wait till the index is made ere he can use it for reference in actual practice. But in the meantime, if he be alive, he must still in some degree be a student, and may learn many a new truth concerning his most familiar remedies by perusing these records of their action—not to speak of deliverance from illusions.

"Possessed with such convictions, we commend this first-fruit of our toil to the acceptance of the homosopathic body, for whose advantage we hope in a few years more to complete the remainder of our task."

We cordially join in this commendation, and in the hope here expressed.

# TWO NEW EDITIONS—"THE LADY'S MANUAL," "INFANTS AND CHILDREN."

The steady demand which still exists for the works of the late Dr. Ruddock is ample testimony to the soundness of their author's judgment. The Lady's Manual has now reached its ninth edition, and the Infants and Children its fifth. The great

<sup>&</sup>lt;sup>1</sup> The Lady's Manual of Homosopathic Treatment. By Dr. Ruddock London: Homosopathic Publishing Company. Homosopathic Treatment of Infants and Children. By Dr. Ruddock. London: Homosopathic Publishing Company.

features of Dr. Ruddock's works are the simplicity and practicability of the author's recommendations where drugs are concerned, and the sterling common sense of their directions on matters not pertaining to drugs. Dr. Ruddock entered sympathetically into the wants of the public, and was thus enabled to meet their wants. It is this fact that accounts for the continued popularity of works like those before us, and the necessity the publishers are under of issuing new editions. We are not aware of the existence of any work of the kind that can at all bear comparison with the Lady's Manual, and though the Infants and Children has more rivals in the field, it still continues to hold its own with ease. Of the work of revising these two editions, for which we are ourselves in a measure responsible, we can of course say nothing; but our necessarily careful perusal of the two books enables us to speak with confidence of the high qualifications possessed by their author, Dr. Ruddock, for the task he undertook.

## HOMEOPATHIC LEAGUE TRACTS 5, 6, AND 7.1

The Homeopathic League continues to justify, and more than justify, its existence by the publication of tracts, which form a perfect armoury for all who are called upon to propagate or to defend the new faith. The three tracts before us contain information which no homeopathist can afford to be ignorant of, presented in most readable and easily utilisable form. We earnestly invite all those who object to the League to study its works, and then ask themselves if they can find any excuse for their attitude. Let them read the statistics of Tract 5, the persecutions recorded in Tract 6, and what opponents have said in favour of Hahnemann and Homeopathy in Tract 7;—and then let them send at once for more copies to distribute among their friends.

### TINCTURE MAKING.3

Mr. Ashwell has been well advised in issuing a reprint of the chapter on Tincture Making from his valuable and most convenient little work, the *Companion to the Homocopathic Pharma*copaias. In this chapter are clearly set forth the different ways of making tinctures—by percolation, combined maceration and per-

<sup>3</sup> Tincture Making. By L. T. Ashwell. Reprinted from the third edition of the Companion to the Homeopathic Pharmacopeias. London: Keene and Ashwell.

<sup>&</sup>lt;sup>1</sup> Homosopathic League Tracts—5. Statistics of Homosopathy; 6. Persecutions of Homosopathy; 7. Testimony of Opponents in Favour of Homosopathy and its Founder. London: J. Bale and Sons, 87-89, Great Titchfield Street, W.

colation, maceration, solution, and by mixture. The relative advantages of each are given. In a prefatory note Mr. Ashwell draws special attention to an article from the pen of Professor A. R. Wallace, and this is so important that we reproduce the passage here. The quotation is apropos of the necessity of using plants collected in their wild state. Mr. Ashwell says:—

"Indigenous plants should be collected in the wild state, and all tinctures, with few exceptions, directed to be prepared from fresh plants which do not grow naturally here should be imported. Among the exceptions are sabina, aconite, cannabis sativa, the cultivated plants of which have been found to yield excellent tinctures, but in each case the habitat, and directions where to obtain, are dis-

tinctly given under each medicine, and should be followed.

"Attempts have been made at different times to acclimatise plants for pharmaceutical purposes, but without any satisfactory result. The experiment, we believe, has been tried with those used in homeopathic pharmacy, and here again without success. Even the American arbor vitæ, which grows well in this country under cultivation, gradually died away, being choked by the surrounding weeds. Take any of the herbs used in medicine which are not found wild in this country, and place them in position and soil, however suitable, without further attention, and in a year or so they will gradually die

"Professor A. R. Wallace, in an article entitled, 'The Debt of Science to Darwin,' writes very forcibly on this subject. He says: -'Every one who has tried it knows the difficulty or impossibility of getting foreign plants, however hardy, to take care of themselves in a garden, as in a state of nature. Wherever we go among the woods, mountains, and meadows of the temperate zone, we find a variety of charming flowers growing luxuriantly amid a dense vegetation of other plants, none of which seem to interfere with each other. By far the larger number of these plants will grow with equal luxuriance in our gardens, showing that peculiarities of soil and climate are not of vital importance; but not one in a thousand of these plants ever runs wild with us, or can be naturalised by the most assiduous trials; and if we attempt to grow them under natural conditions in our gardens, they very soon succumb under the competition of the plants by which they are surrounded. It is only by constant attention, not so much to them as to the neighbours, by pruning and weeding close around them, so as to allow them to get a due proportion of light, air, and moisture, that they can be got to live. Let any one bring home a square foot of turf from a common or hill-top, containing some choice plant growing and flowering luxuriantly, and place it in his garden untouched, in the most favourable conditions of light and moisture, and in a year or two it will almost certainly disappear, killed out by the more vigorous growth of other plants. The constancy of this result, even with plants removed only a mile or two, is a most striking illustration of the preponderating influence of organism on organism—that is, of the struggle for existence. The rare and delicate flower which we find in one field or hedgerow, while for miles around there is no trace of it, maintains itself there, not on account of any speciality of soil or aspect, or other physical conditions being directly favourable to itself, but because in that spot only there exists the exact combination of other plants and animals which alone is not incompatible with its well-being, that combination perhaps being determined by local conditions or changes which many years ago allowed a different set of plants and animals to monopolise the soil, and thus keep out intruders. Such considerations teach us that the varying combinations of plants characteristic of almost every separate field or bank, or hillside, or wood throughout our land, is the result of a most complex and delicate balance of organic forces—the final outcome for the time being of the constant struggle of plants and animals to maintain their existence."—Century Magazine, January, 1883.

### WINTERBURN'S REPERTORY.1

In his dedication of this externely convenient little work (whose 182 pages fill up no more space than is occupied by an ordinary pocket-book) to Professor H. C. Allen, Dr. Winterburn describes it as an effort "to make the study of our art more exact." And in the preface he says:—

"In presenting this pocket-edition key, the compilation of which has steadily progressed during the past four years, the hope is expressed that it may become an incentive to a closer study of the materia medica and a keener application of these materials to the ordinary day-by-day practice. We all study the peculiar and unwonted cases now; but with the means afforded by the convenient size of this index, this same carefulness may pervade the prescription for every case, until at last we shall be enabled to prescribe with that unerring certainty with which the skilled marksman plants his bullet in the eye of the target."

We know of no one better able to compile a repertory of this kind than Dr. Winterburn, and we have no doubt that it will fulfil the purpose for which it is intended as well as it is possible for any book to do this. The weak point in all repertories is their inability to give any certainty of the genuineness of the symptoms they tabulate; but when a prescriber of the carefulness and precision of Dr. Winterburn undertakes to compile a condensed work of this kind, we may be sure he will put down nothing that has not received the keenest criticism in his own mind, and has been confirmed in clinical experience.

In the arrangement of the work the author follows the Schema. Under each heading he gives the symptoms and their conditions, and the medicines which have caused them. It is a work to be used along with the Materia Medica; and as such we can heartily commend it to our readers.

<sup>&</sup>lt;sup>1</sup> A Repertory of the More Characteristic Symptoms of the Materia Medica Edited by G. W. Winterburn, Ph.D., M.D., editor of the American Homeo pathist, etc. New York: A. L. Chatterton and Co. 1886.

### AMERICAN MEDICINAL PLANTS.1

WE heartily congratulate Dr. Millspaugh and the publishers on the appearance of the fourth fascicle of this truly admirable work. The promise of the earlier numbers is fully sustained; and when the work is complete (as it is anticipated that it will be during the course of next year with the issue of the sixth fascicle) homeopathy will be very perceptibly the richer in the possession of what is at once a work of science and a work of art. The contents of the fourth fascicle comprise plates and letterpress description of the following plants: -Ailanthus gland., Aletris farinosa, Archangelica atrop., Celtis occident., Capsella bursa pastoris, Chionanthus virg., Cornus circinata, Cornus sericea, Cicuta maculata, Euphorbia Ipecac., Euonymus atrop., Gymnocladus can., Genista tinct., Ginseng, Juniperus vulg., Magnolia glauca, Menyspermum can., Menyanthes trifol., Myrica cerifera, Opuntia vulgaris, Ostrya virginica, Pirus Americana, Pastinaca sativa, Rhamnus cath., Rhus venenata, Ranunculus bulb., Ranunculus repens. Senega, Serpentaria, Veratrum viride.

It will be seen that Dr. Millspaugh has not confined himself to plants distinctively American; but we do not think this is any fault. We wish he could find the time to give us such lifelike pictures of all our medicinal friends, whether natives of the Old World or the New, as he has given in the beautiful plates before

us of the plants above named.

### A DECALOGUE FOR THE NURSERY.2

THE man who proposes a new pessary or a modified midwifery forceps owes an apology to the public and the profession. Similarly the physician who produces in these days a fresh guide to the domestic treatment of children, if he have nothing new to say, or no new way of saying the old, must be a man of a hardihood which only a conscientious impulse can explain or excuse.

The author of A Decalogue for the Nursery sees the necessity for such a defence in his preface, but the admirable manner in which he presents his directions is his best apology. When it is considered that nearly one-half of the deaths which occur are in children under five years of age, and that a large majority of these deaths are due to errors of feeding and hygiene, the necessity for the repetition of

<sup>2</sup> A Decalogue for the Nursery. By S. J. Donaldson, M.D. Boston; Otis Clapp and Son. 1886.

<sup>&</sup>lt;sup>1</sup> American Medicinal Plants. By Dr. Millspaugh. Fascicle IV. Boericke and Tafel, New York and Philadelphia.

such laws as those in Dr. Donaldson's book is seen to be the duty of philanthropy, rather than the production of manuals of popular medicine with their directions for domestic drugging. Preventive medicine is better than any curative method.

Chapter I. is devoted to the washing and clothing of

infants; the chief errors in bathing are corrected.

Chapter II. is concerned with "Bodily Posture." questionable whether books of this kind should contain so much elementary anatomy. Lay readers, who desire to find out what to do and how to do it, tire with the reading of several pages about the circulation, the spleen and pancreas, and the functions of ptyalin; they require dogmatic directions (as in the original Decalogue). Such handbooks as that before us need not argue points, but should give the results of greater experience and much deeper science than they can possibly detail. Enthusiasts who wish a smattering of physiology and anatomy will get this of a better kind and more systematically arranged in the popular elementary text-books on the subjects. For instance, our author introduces an elaborate anatomical argument to show why children prefer to lie on their bellies and why they should be encouraged to do so. We object to his premises, and we object to his conclusions. The same arguments from structure which he instances would suggest that a child should be accustomed to progress on all fours and should avoid the erect position. Similar reasoning applies to adults, and we do not find them exhibiting a preference for the prone position; nor can we trace disorders to the "muss" in which the internal arrangements get (according to our anthor) when the habits of standing erect or lying on the The preference any particular infant back are acquired. may indicate for a temporary prone position is, we believe, to be accounted for by its desire to get more readily at objects of attraction, such as playthings or the pattern of the carpet. The babies of our acquaintance do not evince that repugnance to lying on the back which is the experience of our author; perhaps that is a peculiarity of the American baby, looking thus early for the almighty dollar. English babies are very happy on their backs, and in that position have better scope for exercising their arms and legs in striking and kicking at the wide, wide world. One little rogue we remember who would stay in no other position; however placed he would roll over on to his back; but, alas'

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he could not return from the supine position, "he wasn't built that way," he was helpless as a plethoric blackbeetle in a similar position. A long-continued prone position interferes with respiration, both thoracic and abdominal, especially with the soft ribs of infants and on a hard surface.

We consider some of Dr. Donaldson's science as "non-Speaking of the manipulation of children's limbs he writes: "There is doubtless not only the benefit of textural quickening, but a direct transmission of vital fluid or animal electricity." Again, he explains lassitude after a bath as due to "the fact that a part of the animal electricity passes from the body to the water."

The author is apparently fond of the gum lancet, a weapon almost obsolete in most men's practice. He also seems to consider dentition from an alarmist standpoint, and the preparations and dangers he attributes to this physiological

process are a severe reproach to Mother Nature.

We entirely disagree with the author in his belief that infantile diarrhea during teething may safely be neglected, and is even beneficial. We know many cases where such ideas have been fatal to the infant. Only lately a fine child of our acquaintance was suffered to endure untreated diarrhœa for four weeks, because the mother's neighbours and friends (?) told her she ought to thank God for the diarrhosa during teething. When medical aid was summoned in the fifth week it was too late, and the little skeleton died on the third day.

We disagree with the chapters on "Bodily Posture" and "Dentition," but with the rest of the book generally we are

in accord.

The chapter on "Infant Diet" is particularly good, and its directions should be familiar to every one having the care of infants. The chapters on the early indications of disease and the domestic treatment thereof are admirable.

# Obituary.

### THOMAS HAYLE, M.D. Edin.

Another veteran has passed away. On the 17th of September Dr. Thomas Hayle. of Rochdale, died, after a long illness, at the age of seventy-eight. In 1877 his health began to give way, when he was attacked with a slight paralytic seizure, but after an interval he resumed work, and though he practised little after 1879, when his son, Dr Thomas Hahnemann Hayle, joined him in practice, his mental vigour continued unabated, as his contributions to literature sufficiently proved. Thomas Hayle was born in Jamaica in 1808, and came to England with his father, Dr. William Pusey Hayle, in 1817, when he was placed at Tiverton Grammar School, proceeding from thence in 1825 to the University of Edinburgh. In 1829 he was admitted a licentiate of the Edinburgh College of Surgeons, and passed his M.D. examination the following year. Being urgently required in Jamaica, he could not then remain for the ceremony of capping, which, however, he underwent on his return in 1837. His return was necessitated by an attack of brain fever, which followed excessive exertions during a small-pox epidemic. The following year he married, and settled in a country practice. His cousin, the late Dr. Fearon, of Birmingham, induced him to read Hahnemann's Organon in 1840.

"To one who was grieving over the uncertainty which characterised the details of therapeutics"—writes Dr. Pope,1 to whom we are indebted for the particulars of this chituary notice,-"who had been distressed by the confusion which existed in the therapeutic parts of works on practical medicine. who had seen through the unphilosophical character of the mode of therapeutic investigation, no great degree of persuasion was probably needed to induce the study of so thoroughly philosophical a work as The Organon of Medicine, or persuade one who was so entirely conscientious, as he ever was in everything he undertook, to examine the quality of its teaching by the light of practical experience. As has happened in most cases, so it did in Hayle's, the small dose was the great stumbling-block; at the same time, as he said, he 'saw clearly that it could easily be proved whether it acted or not.' His first experiments were on patients he had given up as incurable, making no alteration in their diet. 'The result,' he says, 'of my trials, on cases which I deemed incurable, was, that the coincidences were strange and so frequent as to warrant my proceeding with the trials in slight cases of an acute character.' Here, again, the constant recurrence of successful results soon convinced him that he 'had no greater evidence for the truth of any believed order of facts than he had for the truth of the homeopathic principle and the action of minute doses.' Had every physician and surgeon who has, at one time or other, been appealed to to inquire into homosopathy, adopted the careful method of Dr. Hayle, and carried it into practice as conscientiously and with as single-minded a determination to arrive at the truth as he did.

<sup>&</sup>lt;sup>1</sup> Monthly Homosopathic Review, November, 1886.

those now practising homosopathy would have constituted the

majority of the profession."

The year after this Hayle left his country practice and afterwards settled in Newcastle-on-Tyne, the immediate cause of his removing having been a fall from his horse. Here he spent many years of active practice, passing through an epidemic of cholera in 1853-4. "In 1851 he delivered two lectures on homeopathy in Newcastle, in reply to a very virulent and ignorant attack upon Hahnemann and homeopathy, by Dr. Glover, at that time practising there, but who, for some years past, has been on the staff of the Lanest, and is just now a candidate for a seat at the Board of the Medical Council." In 1862 he removed to Rochdale, which was his home for the remainder of his days. In 1876 he was President of the British Homeopathic Congress.

Dr. Hayle was far above the average of medical practitioners in professional ability, and he was, in addition, a man of no mean literary powers. He was held in high esteem and affec-

tion by his medical brethren.

Dr. Hayle is succeeded in practice by Dr. T. H. Hayle, his second surviving son. His widow also survives him, and several daughters, one of whom is married to Dr. Kennedy, of Newcastle, the son of his former colleague.

<sup>1</sup> Monthly Homocopathic Review, November, 1886.

# GENERAL CORRESPONDENCE.

### THE PROVINGS OF CARBO VEG.

To the Editor of the Homeopathic World.

SIR,—At p. 441 of Homoopathic World, R. H. (? Dr. Richard Hughes) states that provings 16 to 25 of Carbo Veg. in Allen are really symptoms after Sacch.-Lact. On referring to the original Transactions, pp. 140-1, I find that provings 16, 17, 18 were from Carbo Veg., and not after Sac.-Lact. No. 24 attributed to F. H. apparently should be F. H. S. (see Transactions, p. 168). Furthermore, out of the voluminous symptoms belonging to Nos. 19-25, only 27 are quoted by Allen, who also has unaccountably omitted a large number of symptoms belonging to the real provings of Carbo Veg., when only Sac.-Lact. was taken, have been a puzzle to many. I have not yet found time to analyse the symptoms, but would suggest that the following facts should be bernei. mind:—

(1) That Sac.-Last., even in its crude form, does produ symptoms in some persons.

(2) That the triturations of Carbo Veg. are made with Sec-Lact. E. W. Berridge.

[We have referred Dr. Berridge's note to Dr. Hughes, who

writes that "16" is a misprint for "19," as "black" is for "blank." We regret that these errors should have occurred: but did not think it necessary to send Dr. Hughes a proof of so brief a communication, and the corrections were not obvious.— ED. II. W.

# SOUTHERN HOMOTOPATHIC MEDICAL ASSOCIATION.

To the Editor of the Homeopathic World.

THE Southern Homosopathic Medical Association will hold its third annual meeting at New Orleans, La., on Wednesday, Thursday, and Friday, December 8th, 9th, and 10th, 1886. The two previous meetings have been well attended; the interest has steadily increased, and this year a full attendance of all Southern physicians is expected. Six bureaux will be ably represented. Let all who are interested in the growth of homoeopathy make preparations to attend, and gain both pleasure and profit in the Crescent City.

> A. L. Monroe, M.D., President, Louisville, Ky. C. G. Fellows, M.D., Rec. Sec., New Orleans, La.

#### MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Bettany (G. T.). Eminent Doctors: Their Lives and their Work. 2nd ed. 2 vols. Post 8vo, pp. 610. (Hogg. 12s.)

Ohevers (N.). A Commentary on the Diseases of India. 8vo, pp. 810. (Church-ill. 24s.)

Ohina: Reports for the Half-Year ending 31st March, 1886, of the Medical Officers of the China Customs Service. 6 Plates. 4to, ad., pp. 86. (P. S. King and Son.

Goodhart (J. F.). Student's Guide to Diseases of Children. 2nd ed. 12mo, pp. 706. (Churchill. 10s. 6d.) Gowers (W. R.). A Manual of the Diseases of the Nervous System. Vol. 1, Diseases of the Spinal Chord and Nerves. 8vo, pp. 460. (Churchill. 12s. 6d.)

Hood (D. W. C.). Diseases and their Commencement: Lectures to Trained Nurses, Delivered at the West London Hospital. Post 8vo, pp. 136. (Churchill.

Maciean (Wm. Campbell). Diseases of Tropical Climates. Lectures Delivered at the Army Medical School. Post 8vo, pp. 838. (Macmillan. 10s. 6d.) Pollock (C. F.). The Normal and Patho-logical Histology of the Human Bye and Eyelids. With 230 Original Draw-

ings by the Author, Lithographed in Black and Colours. Post 8vo. (Churchill. 158.)

Robinson (T.). The Diagnosis and Treatment of Syphilis. Post 8vo, pp. 134. (Churchill. 3s. 6d.)
Ruddock (E. H.). The Lady's Manual of Homeopathic Treatment in the various

Derangements incident to her Sex. Ninth edition. (Post 8vo, pp. 269. (Homeopathic Publishing Company. Ss. 6d.)
Ruddock (E. H.). The Diseases of Infants

and Children, and their Homeopathic and General Treatment. Fifth edition.

and General Treatment. Fifth edition. Post 8vo, pp. 244. (Homosopathic Publishing Company. 3s. 6d.)
Sharp (W.). Therapeutics founded upon Organopathy and Antiproxy. 8vo, pp. 204. (Bell and Sons. 6s.)
Sutton (H. G.). Lectures on Medical Pathology Delivered at the London Hospital in the Summer Session, 1885. Post 8vo, np. 298. (Ballilare 5s.

8vo, pp. 228. (Ballilere. 5s.)
Wills (G. S. V.). Elements of Pharmacy.
Designed as a Text-Book for Students Preparing for the various Examinations in Pharmacy. 6th ed., rewritten and enlarged, in accordance with the British Pharmacoposia, 1885. Post 8vo, pp. 260. (Simpkin. 64. 6d.)

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## SHORT NOTES, ANSWERS TO CORRESPONDENTS, ETC.

ALL literary matter, Reports of Hospitals, Dispensaries, Societies, and Books for Review, should be sent to the Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester Road, South Kensington, S.W.

All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

DR. SHACKLETON.—We are much obliged to you for calling our attention to the letter, which had escaped our notice.

DR. PULLAR.—Dr. Pullar, late of Edinburgh, has removed to Leonard Bank, Beulah Hill, Upper Norwood, S.E. We are glad to learn that Dr. Pullar has undertaken to give his services to the Norwood and Streatham Dispensaries.

#### CORRESPONDENTS.

Communications received from Miss Brown, Paris; Dr. Berridge, London; Dr. Hughes, Brighton; Dr. Meyhoffer, Nice; Dr. A. L. Monroe, Louisville; Dr. C. G. Fellows, New Orleans; Dr. J. D. Haywood, Liverpool; Dr. Shackleton, London; Dr. Wilder, New York; Dr. Cay, Leamington; Dr. Cooper, London; Mr. G. A. Cross, London; Dr. Pullar, Norwood; Dr. Tuckey, London; Otis Clapp and Son, Boston.

# BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische Zeitung.—Zoophilist. — Medical Advance. - Monthly Ho-Review. — Homœopathic möopatische Monatsblätter.-New York Medical Times .-St. Louis Periscope.—Medical Current. — Clinique. — Medi-Visitor.—Chemist Druggist. - Hahnemannian Monthly. — Medical Medical Annals.—California Homosopath. — The Clinical Review.—Homeopathic Physician.—Homeopathic Recorder.—L'Art Medical.—Bibliothèque Homœopathique.—St. Louis Medical Journal.—Medical Investigator.—Homosopathic Journal of Obstetrics.— ClinicalReview.—NewEngland Medical Gazette. — Maanedsckrift für Homæopathi.—Revista Omeopatica.—Igea.—La Reforma Medica.—Curability of Consumption. By Dr. Gutteridge.—The Medical Treatment of our Time. By One Excommunicated.— Transactions of the Homeopathic Pharmaceutic Association of Great Britain.—Therapeutic Methods. By J.P. Dake, M.D.--Lecture on Homeopathy. 3rd Edition. By C. Wesselhæft.— L'Union Homosopathique.

#### THE

# HOMŒOPATHIC WORLD.

### DECEMBER 1, 1886.

#### 1886.

THE year that is rapidly passing away has not been uneventful in the annals of British Homeopathy. There has been heard a shaking among the dry bones, and the echo of it has sounded to the ends of the earth, and has not yet died away. On the contrary, it has swelled into the noise as of a gathering host. The warfare has already begun; and the spectacle of convention-loving, custom-bound Britain rising in revolt against ignorant Convention and cruel Custom has raised the spirits of truth-lovers all over the world.

The year began with schemes and plans to give effect to a new spirit of action that had visibly taken possession of the long dormant homosopathic body. At last the needed outlet was found in the Homogopathic League. In response to the invitation to form such a body numbers of favourable replies came rapidly in, and the LEAGUE was an established fact. Once formed, there was no delay in getting to work. Unconnected with the LEAGUE, and yet in a way heralding the movement, was the publication of Dr. Dudgeon's Medical Boycotting and At Last. These two pamphlets, one of which showed the unaltered hostility of the old school to homeopathy, and the other the wholesale fashion in which its professors "convey" homeopathy to their own books without acknowledgment, sounded the war-note. These have been followed by a series of Homeopathic League Tracts, which have already made their mark, and which ought to be in the hands of every believer in the truth of Hahnemann's system.

Arising out of the new movement was Major VAUGHAN Morgan's offer to give a prize of 25 guineas for the best Essay on Homocopathy, a prize which has been awarded to Dr. John D. HAYWARD, of Liverpool, for his admirable pamphlet. The Medical Treatment of Our Time; or, Medicine: Orthodox and Heterodox. This essay is to be sent to every medical man on the Register, and will constitute a kind of last appeal. The supporters of the LEAGUE are not very sanguine as to the results that will follow this appeal. They consider that the profession have been piped to long enough without showing any sign of dancing; and they have directed their appeal to the People. The people have already shown a willingness to listen; and their journals have shown that they have not listened in vain. It needs but that the followers of HAHNEMANN should prove themselves earnest and resolute in order to command the respect and approval of the people; and when that is won, the disrespect of professional bigots and scientific Philistines will merely enhance the glory of the victories attained.

There is news of extension of the London Homosopathic Hospital during the year, and the proceeds of the Bazaar and Art Distribution will go far to warrant the authorities in opening the new Bayes Ward.

Among the events of the year abroad must be mentioned with peculiar emphasis the International Convention at Bâle. So much has been said in our pages on this subject that the bare mention will be sufficient here to awaken pleasant memories in the minds of those who attended, and to point all our hopes forward to the next meeting on the other side of the Atlantic, to be held, if all goes well, in 1891. America is the naturalised home of Hahnemann's system, and we do not forget that it was from America that came the spark (in the genial converse of our good friend DAKE) that lit the flame that has now blazed up into the forward movement at home.

In concluding the first complete volume of the Homoso-PATHIC WORLD issued under our editorship, we cannot forbear to express the gratification that it has given us to receive the many expressions of pleasure on the part of our supporters at the fare with which we have provided them month by month. The kind words from our brother editors of the *Review*—to whom we are indebted for many courtesies—have been especially gratifying. And we must also mention the pleasure it affords us to know that the Homgopathic World has been of some service in reviving the cause of Progress.

# NOTES.

#### HOANG-NAN IN HYDROPHOBIA.

THE following is from the Paris letter in the Lancet, July 31st:—

"According to the Gazette Médicale de Nantes, twenty-four cases of rabies have been treated with Hoang-nan by Dr. Barthélemy and several other medical men of that city or of the department. The first case so treated was in the month of March, 1882, the last in April, 1885. Ten times, at least, the bites, which were most frequently multiple, were situated on the hands, once on the hand and on the face. In the majority of cases cauterisation was completely omitted, or practised several hours or even several days after, with agents little active, such as liquid ammonia or a solution of carbolic acid. Two of the patients, who were closely observed by Dr. Barthélemy—viz., a man of thirty and a lad of sixteen—presented symptoms of rabic mania: persistent insomnia, anxiety, nocturnal agitation, the desire to run, hallucinations, barking, etc. However, none of these persons felt hydrophobic, nor have any of them, to this day, succumbed. The duration of this preventive treatment was, on an average, twelve days. The total dose of the powder of hoang-nan ingested during this time varied in adults from six to eight grammes. It was scarcely necessary to go beyond one gramme per day to obtain the physiological effects of the medicine—exaggeration of the reflexes, cramps, rigidity, slight trismus. The maximum dose was arrived at progressively, and in some cases the treatment was terminated by gradually decreasing doses. From the above cases the author deduces either that rabies is communicated much more rarely to the human species than is generally admitted, or that the hoang-nan, administered progressively to the physiological effects during the period of incubation, sufficiently and efficaciously modifies the nervous system and the entire economy to prevent the evolution of the rabic virus."

In the meantime there is great and increasing mortality reported among M. Pasteur's "patients." But decorations and subscriptions are still being showered upon him in direct proportion to the length of his death-roll.

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## More Remedies for Hydrophobia.

### 1. Spiræa Filipendula.

A Polish medical man, says the Lancet (October 2nd), Dr. Fürst Ignatz Jagell, who has interested himself for twenty-five years in the treatment of hydrophobia, claims to have cured twenty-six dog-bitten and wolf-bitten persons, in whom the symptoms of hydrophobia had actually supervened, with the dropwort, Spirae Filipendula. In sixty-three persons treated by him, after being bitten, with an infusion of the same plant no symptoms supervened. This beats the record of M. Pasteur, of whose system Dr. Jagell strongly disapproves.

#### 2. Cantharides.

The following is from the British Medical Journal of November 6th:—

"Cantharides in the Bites of Rabid Animals.

"Dr. Karchevski mentions in the Russkaya Meditsina that he has successfully treated some patients who had been bitten by a rabid wolf with Cantharides. The wolf attacked three men, inflicting on the first a large and deep wound in the left groin, a piece of skin several square inches in area being torn off. The other men were wounded in the face, legs, and arms, but more superficially. Still, the bites of a rabid wolf are well known to be peculiarly dangerous. Dr. Karchevski remembered a conversation he had had with Professor Lashkevich, in which the latter had suggested Cantharides as a remedy in hydrophobia, and he therefore made up his mind to give it a trial. Cantharides plasters were applied to all the wounds, and powdered Cantharides was administered to each of the three patients in doses of a grain a day. The internal administration was continued for a week, till the patients complained of some heat in the urethra. Seven months having passed, and all the patients being still perfectly healthy, the author thinks the cases worth recording, though he is quite aware that post hoc is not necessarily in this instance propter hoc."

Cantharis is distinctly homeopathic to hydrophobia.

# 3. The Viper.

The Lancet of October 30th is responsible for this:—

"A writer in Los Avisos mentions that a dog which had been several times severely bitten by different rabid dogs, and had shown no symptoms of rabies itself, had been previously twice bitten by vipers, and suggests the possibility of the poison of the viper having conferred an immunity from rabies."

#### THE SKUNK AND RABIES.

THE Medical Press of October 20th notices that the skunk is among the animals liable to rabies, and intimates that it may be developed among them spontaneously. When affected they will attack other animals and human beings, often biting them when they are asleep. Their bites are very dangerous.

#### THE RABBIT DISEASE.

Two more deaths have occurred among the English patients of M. Pasteur, making three in all. One, a man named Goffi, an attendant at the Brown institution, bitten by a cat not known to be rabid, died at St. Thomas's Hospital; the other, a man named Wilde, of Rotherham, who had been bitten by a patient suffering from hydrophobia, died at Rotherham after a few days' illness. In both of these patients the symptoms were peculiar, and not like those of any known disease, though not unlike the disease M. Pasteur calls hydrophobia in rabbits. They had both been inoculated by his later method, in which nineteen inoculations are performed in ten days, and the strongest on the third day. It is extremely probable that they died of the rabbit disease invented by M. Pasteur.

# SULPHATE OF MAGNESIA FOR WARTS.

THE Medical Press (October 20th) contains the following interesting note:—

"It is now fairly established that the common wart, which is so unsightly and often so proliferous on the hands and face, can be easily removed by small doses of sulphate of magnesia taken internally. M. Colrat, of Lyons, has drawn attention to this extraordinary fact. Several children treated with three-grain doses of Epsom salts, morning and evening, were promptly cured. M. Aubert cites the case of a woman whose face was disfigured by these excrescences, and who was cured in a month by a drachm and a half of magnesia taken daily. Another medical man reports a case of very large warts which disappeared in a fortnight from the daily administration of ten grains of the salts."

# A NICE POINT IN ETHICS (MEDICAL).

THE British Medical Journal of November 6th contains, under the heading "Medico-Legal and Medico-Ethical," the following amusing query:—

#### "Taking charge of a Homosopathic Practice.

""Fair Play' writes: A. B. and C. D. are neighbouring practitioners in a fashionable seaside health resort. A. B. is an avowed homeopath, and C. D. ranks as an allopath. A. B., on going from home, leaves his patients in charge of C. D.; C. D., on going from home, leaves his patients in charge of A. B. Is this regular? Does it not mean consultation? To my mind, and many others, C. D. should rank as a homeopath."

"Many others" is not very good grammar; but why care for grammar so long as we "rank as allopaths"? "Fair Play," evidently acutely conscious of his elevated station, is jealous to a degree of the honour of his caste. If he had referred his difficulty to us we should have advised him toconsult the patients of the two amiable members of the opposing sections. It is the strange point about "medical ethics" that the patient has no place in it except incidentally. Some innocent persons think that the patient's interest should be considered above everything; and we so far agree with them that we should have advised "Fair Play" (had he thought well to consult us) to inquire if the patients of these two gentlemen had benefited by their mutual obligingness; and if he found that they had, to vex his righteous soul no more about the matter. But the medico-ethico-legal luminary who "does" this column of the British Medical Journal has a different way of meeting the difficulties of its correspondent. He says :-

"As the most authoritative dictum on the point submitted by our correspondent, we quote, as an expression of our views on the subject, the following brief extract from the Code of Medical Ethics, second edition, page 52, rule 3: 'It is degrading to the true science of medicine to practise homeopathy,' etc., such being deemed incompatible with the honour and dignity of the profession. We would, at the same time, refer him to a foot-note on pages 56, 57, and 58, in which the important question of consultation with homeopaths is tersely discussed."

We trust that "Fair Play" obtained a good night's sleep after reading this soothing reply. It is true it does not meet his point very well, and leaves him still in doubt as to whether "this is regular" or not; but then it curses homeopathy in such a downright comforting style that he could not help feeling a glow of exultation in the contemplation of his own truly "scientific," "regular," and "allopathic" rank and station, in comparison with that of his quasi-allopathic confrère, who degrades himself medically, if not ethically or legally, by showing kindness to an

"unscientific," "irregular," "homoeopathic" stepbrother!—Believers in the speedy union of the two schools—behold the "Fair Play" you are hoping to find!

#### THE LEAGUE.

THE membership of the HOMEOPATHIC LEAGUE now numbers over 300 strong, and is represented in all parts of the world—at least, from China to Kansas, and from Scotland to Australasia. The literature has taken. Demands for it are coming in from all quarters, and it has found its way into medical schools. At present it may be like the "little leaven," but ere long it will influence the whole lump. There has been but one opinion expressed on that which has been already produced—that it is good, telling, instructive, and to open minds absolutely convincing. Those who have the cause not of homocopathy merely at heart, but of fairplay (the genuine article we mean, not the allopathic variety), cannot help the cause they favour better than by subscribing to the LEAGUE. We are happy to say that we have already secured a number of earnest laymen to join the committee, and as soon as the number is large enough the medical men will surrender its management into their hands.

#### An Outside Opinion.

THE following is from the London Figure of October 30th:

"There are two classes who sneer at homocopathy—the ignorant who know nothing at all about it, and the prejudiced who will not be convinced of its merits. Unfortunately, the ignorant and the prejudiced form a very considerable proportion of the community; they are always the stumbling-blocks of progress, and the opponents of new methods. Therefore, it is not remarkable that the disciples of Hahnemann have not always found it easy to obtain a hearing."

This is very well said. When the outside world comes to speak of homosopathy in this strain it matters very little what the medical papers say. They will preach their ridiculous nonsense to deaf ears, or be met with laughter, when the public are well instructed as to the true merits of the case. It is a large undertaking, no doubt, but the League will not shrink from the task. David looked very insignificant as he faced the giant, but he was much the bigger man for all that.

#### A GOOD EXAMPLE.

THEY move faster outside our tight(-laced) little island. What would Mr. "Fair Play" think of the following had it occurred in an editorial article in the Times, or even in the Christchurch Advertiser, instead of in the New Zealand Herald?—

"What a shock it is to medical orthodoxy to see a disciple of Hahnemann actually selected by the chemists to represent New Zealand pharmacy in the congregated wisdom of the Pharmaceutical Conference of Australasia. Pestle and mortar, and glauber salts, whatever are we coming to! That tinctures and pilules and infinitesimal essences should represent us in the vigorous assemblage of blisters, cauteries, and cathartics, shows how changed we are from days gone by. Among the singular and significant signs of the times, I see that our talented homeopath and analytical chemist, Mr. Pond, has actually been chosen as one of the two delegates to represent the chemists of New Zealand at the Pharmaceutical Conference at Melbourne: a conference which proposes to regulate the education and admission of members of the craft, and fix the standard of qualification for the chemists of the colonies. If we sought anywhere for evidence of the growth of reason and intelligence, and the death of prejudice in scientific research, we could find it nowhere more expressively shown than in this honourable selection of a homeopath to represent the guild in Australia."

This is all very "irregular," no doubt, but the fact is, Mr. Pond is one of the ablest men in the colony, and when the late terrible volcanic eruption occurred, no better man could be found to be sent to investigate the causes of the outbreak. Homeopathic pharmacy is to be congratulated on having such a good representative in the colony as Mr. Pond, and the New Zealanders are to be congratulated also on having the wit to discern true talent, even though the owner of it may not belong to the orthodox caste.

# "RINGER'S PILLS."

"RINGER'S PILLS" cannot exactly be described as a "safe remedy." Dr. Strahan, of Belfast, writing in the British Medical Journal of September 18th on "an unrecorded danger from continued large doses of iron," mentions Ringer's Pills as one of the most dangerous of all, unless taken along with some purgative as "corrigens."

"Large doses of iron," says Dr. Strahan, "act as an immediate stimulant, rapidly remove ansemia, remove gastro-intestinal catarrh, renew appetite and digestion; but, unfortunately, if continued more than a week or two, they cause a gastro-intestinal

estarrh of their own, and if this be not attended with diarrhose, or if a purgative be not given, serious symptoms may ensue."

Ringer's Pill contains five grains of dried sulphate of iron, and is equivalent to eight grains of ordinary sulphate. If this or if half or whole drachm doses of the tincture, or of the Mist. Ferri Co. of B.P., made so strong as to contain eight or ten grains of sulphate of iron and carbonate of potash in each dose, be given for one or two weeks, two or three times a day, unless a natural or artificial diarrhœa should set in, severe colic and constipation will ensue, which morphine and turpentine stupes are powerless to alleviate. Dr. Strahan says:—

"I have seen twenty-four hours of rhythmic agonising pain, very like labour, with nearly constant vomiting, no sleep or ease after a grain of morphine by the mouth, the temperature rising to 101deg. Fahr., with great depression of all the powers of life, from a couple of weeks' course of Ringer's pill, which had done immense good to the system at large. This has not occurred once only but dozens of times, and now I expect it and provide against it."

Dr. Strahan gives an ounce of sulphate of magnesia (or other saline cathartic), and as soon as it acts well the symptoms disappear. In twenty-four hours the stools seem half water and half black sand, which latter had formed the obstruction. The quantity of this black sand is surprising—seemingly greater than the whole amount of iron taken, though the stools may have been jet-black all along since the patient's first taking the iron.

#### Horseradish in Neuralgia.

WE have no good proving of Cochlearia Armoracia (horse-radish), but it ought to prove a valuable remedy. In domestic practice it has a great reputation as a cure for neuralgia, and a recent experience has convinced us that its reputation is well deserved. A patient of onrs, a young lady, suffering from facial neuralgia, which our remedies had failed to relieve, was recommended by her domestic to try horse-radish. The horseradish was scraped as for culinary purposes, and the scrapings applied in the manner of a poultice to the part affected; at the same time a quantity of the scrapings was held in the hand of the side affected. The result was a speedy and permanent disappearance of the pain, the hand which held the horseradish becoming within a short time white and dead temporarily. We have heard

of other similar experiences, and if any of our readers have seen cases of the kind we invite them to send us their notes.

#### LYCOPODIUM IN SCIATICA.

Our good friend, Dr. Oscar Hansen, of Copenhagen, has set a good example, which we trust will be extensively followed by our contributors. He has sent us the following very interesting experience:—

"I have had a case of ischias in which the pains were relieved by continuous movement, aggravated by beginning movement. Rhus without effect. Lyc. 30 cured the patient. He is now quite well."

This report of a really valuable case does not occupy the space of an ordinary post-card, and yet all the essentials are given. We hope Dr. Hansen will let us have more of this kind; and we cordially commend his example to our other contributors. Sometimes a case is not sent because there is not enough of it, but if the essentials are there the shorter the report the better.

#### THE ART DISTRIBUTION.

The works of art presented to the London Homceopathic Hospital for the distribution have been valued by experts and pronounced by them to be worth upwards of £1,000. They are now on view in the Bayes Ward, for the opening of which the fund now being raised is intended. Only 500 tickets will be issued, and therefore every purchaser of a ticket is more than likely to obtain a quid pro quo. The tickets are one guinea each, or six for £5. The distribution will take place early in December, and those who intend to have shares and have not yet obtained them should apply to the secretary, Mr. G. A. Cross, Homceopathic Hospital, Great Ormond Street, W.C., without delay.

## HOMOSOPATHY IN DENMARK-A CORRECTION.

Dr. Hansen writes to us that our report of his remarks on p. 404 (September) is not correct in two particulars. It should have read: "One eminent surgeon and one of the best accoucheurs in Denmark are liberal in respect to homeopathy;" and "In 1885 we lost the right of dispensing our own medicines in Denmark." This last we understood and reported in exactly the reverse sense.

#### LITERARY ITEMS.

WE have received from Antwerp the first number of L'Union Homocopathique, a new quarterly conducted by Dr. Boniface Schmitz, formerly one of the most active contributors to the Revue Homeopathique Belge. We had recently the great pleasure of making Dr. Schmitz's acquaintance at Bale. We congratulate him on the admirable start he has made, and we wish him all the success he deserves. are indebted to Dr. Bonino, of Turin, for the fourth fascicle of L'Omiopatia in Italia, the organ of Italian Institute of Homeopathy. It gives an account of the fifth congress held at Naples on the 2nd and 3rd of September under the presidency of Dr. Bonino. The number also contains an account of part of the proceedings at Bale. The second edition of the Prescriber is now ready; and also The Revolution in Medicine. The Transactions of the Bale Congress, containing the papers in full, will shortly be in the hands of the public. Dr. Burnett has published a new volume entitled Diseases of the Skin from the Organismic Standpoint, of which we hope to give a notice next month.

# ORIGINAL COMMUNICATIONS.

# FASHION IN HEALTH-RESORTS.

By R. E. DUDGEON, M.D.

THE receipt by post of an elaborate chromo-lithographed plan of Davos, with a picture of that fashionable Curort in one corner, and a warm recommendation of the place by one of the local doctors, suggests to me the advisability of saying a few words of caution in respect to the prevalent habit of advising patients, who wish or who do not wish to go abroad, to follow the multitude to the last well-puffed health-resort (so called), without taking due pains to ascertain whether the place is suited to their complaints.

The pretty advertisement of Davos just received reminds me that during the past few years I have seen a considerable number of cases who had been sent to that lofty region by their physicians, and who had come back much the worse of

their trip, or not come back at all.

It should be remembered that the height of Davos above the sea-level, which diminishes the atmospheric pressure to the extent of five inches, is not the only feature in the locality to be considered. The great heat of the sun in the clear atmosphere, though a foot or two of snow may be on the ground, the sudden fall of the temperature as soon as the sun goes down behind the mountain-tops, which it does at about three o'clock, or sooner, in the winter months, must make Davos a very risky place to send patients to who are very sensitive to changes of temperature. I am very far from denying that the climate of Davos, and even a winter's residence there, may be beneficial to some cases of pulmonary disease. I have heard and read of such cases being benefited, but I know that it is not pulmonary cases only which are sent there, and I confess that my experience is all the other way, as, though I have seen many patients who have been to Davos, I have not yet met with one who has been benefited by it, but every case I have seen has been decidedly the worse. Quite lately several remarkably striking cases of this kind have come under my observation. The first case I shall mention is that of a fine tall young lady who was subject to a hoarse dry cough, but I could detect no mischief in her lungs on careful examination. The cough seemed to me to be chiefly of a nervous character, and to proceed from some irritation in the larynx. She told me she had been recommended to winter at Davos, and asked my opinion. I said that I did not think a winter at Davos was necessary, and that the climate there being of such a peculiar nature, it was doubtful if it would agree with a patient for whose malady it did not seem indicated. was in June, 1883. I did not see her until the following June, and I scarcely recognised her, so much was she altered in appearance for the worse. She was emaciated, breathless, her appetite was bad, and her menstrual function all out of order. She told me that she soon began to experience the bad effects of the climate of Davos, and though her cough remained unaffected, her health and strength gradually left her, and she believed that if she had not come away she would have soon died. She had been slowly recovering since leaving Davos, and was now very much better than when she first descended the fatal mountain. I could not discover that anything besides the mere residence in Dayos had brought her to this pitiable condition. A short course of Bryonia and her native air soon restored her, and I have heard quite lately that she is strong and well.

Another case is that of a gentleman and his wife who were

both rather rheumatic. I do not know, and scarcely think, that any doctor advised them on the matter; most likely they thought that Davos, like Mother Seigel's syrup, must be equally good for all complaints. Perhaps it would have been better for them had they stopped at home and taken the aforesaid syrup, or rubbed themselves all over with St. Jacob's oil or Pond's extract. At all events, I do not believe that these nostrums would have done them half the harm they got from Davos. The husband's rheumatism developed into painful rheumatoid arthritis, especially of the knees; the wife came back with rheumatism in her pectoral muscles. that rendered all movements of the arms difficult and painful. Even during the summer months at home they did not entirely lose their Davos-acquired malady, and I was fain to advise them both to spend next winter in Madeira, to escape those changes of temperature and climate which they had imprudently courted at Davos.

Quite lately I was summoned to a hotel to see a lady who was coughing up blood rather freely. She had just left Davos, whither she had been sent by her physicians after an attack of hæmoptysis, and where she had spent three summer months. While there she had had a similar attack, and her strength, which had been pretty good before going there, had failed very much during her residence in Davos. I suggested that on her recovery from this attack she should go to Bournemouth, as being, in my opinion, a more suitable locality for her. I believe if she had stopped much longer in that exalted region she would have had to stop

there for ever.

The last case I shall mention is that of a gentleman, aged about sixty, engaged in very extensive and harassing business, who had consulted me intermittently since February, 1879. The first occasion on which I prescribed for him was for obstinate epistaxis, which he had had for a month. He had been subject to bleeding piles, but since the epistaxis commenced the piles—at least their bleeding—had ceased. He had been under allopathic treatment without any good effect on the nose-bleeding, which came on every morning. A few doses of *Hamamelis* 1 soon put a stop to this bleeding. I did not see him again until September, 1881, when he complained of expectoration by hawking, without cough, of a quantity of thick yellow phlegm in the morning. I prescribed Kali Bichrom. 3, and saw nothing more of him until December of that year, when



he came back for bleeding at the nose, for which he had put himself again under allopathic treatment, but without good result, for when he came to me he was very weak and ansemic. China 3x followed by Hamamelis again put him right in a short time. August, 1883, was the next time he appeared in my consulting-room. The bleeding had returned, this time from the right nostril; the left nostril was the defaulter on the two former occasions. He had likewise an attack of piles from sitting on wet grass. Hamamelis 1x and Aconite 3 sufficed to relieve him of these symptoms. Last September he visited me again, but so changed in appearance that I did not at first recognise him. He told me that in the spring he had been very much harassed in business, having the responsibility of a very large concern on his hands. He had had no return of epistaxis since I last prescribed for him, but had for months been plagued by a tiresome cough with yellowish mucous expectoration, which was particularly tiresome at night. He excused himself for not having come to see me by telling me that he had been persuaded by friends to consult a very fashionable physician of the old school who had a great reputation as a specialist for coughs. This physician had treated him for some time without benefit; indeed, he had been steadily growing worse all the time. The physician recommended him to put himself under the care of a special throat doctor, who sprayed his throat every day. But the expense of this treatment was, he said, more than he could afford, and as he did not derive any benefit from the daily spray, he went back to the eminent physician, who advised him to go to Scotland, whence he had just returned weaker and more emaciated than before. The nocturnal cough was attended by fever and night-sweats, and the physician now advised him to go to Davos. He came to ask my opinion on the subject. I examined him carefully, and told him that I did not think Davos was a suitable place for him, as he was evidently suffering from brain-fag in addition to chronic tracheal and bronchial catarrh, and a very excited and weakened circulation, and I knew from Dr. Pope's interesting article on Davos that his case was quite unsuited for that "health-resort." I prescribed Phosphorus 2, and recommended him to go to Hastings or Bournemouth, or, if he would go abroad, to take a voyage to the Mediterranean, but on no account to expose himself to the trying climate of Davos, with its rapid alternations of temperature and its deadly and enervating Föhn. On leaving me he went back to the eminent physician, who assured him that Davos would set him up in five or six weeks and make him quite fit for his business, which he said urgently required his presence. He allowed himself to be persuaded to undertake the journey to Davos, and, accompanied by his wife, he started in the beginning of October. The journey proved most fatiguing, and the second day after his arrival at the Alpine Curort he was dead.

The history of this case presents several points of interest. This gentleman, a keen and clever man of business, had, as I have related, been several times rapidly cured by homeopathy, after having been long unsuccessfully treated by the old system, and yet at each recurrence of illness he had always first submitted to a lengthened allopathic treatment, and only came to me after experiencing its useless or mischievous effects. It seems that though he always got rapidly well under my treatment, he never acquired any liking for the homeopathic method, which yet had never failed to cure him after the other methods had signally failed. Experience did not teach him; for, at each new illness, he allowed himself to be persuaded to consult some eminent man of the old school, and only came to me as a sort of dernier ressort, as though he wished to be cured in the orthodox manner, and was somewhat ashamed to consult a practitioner of the despised homeopathic school. his last illness it was evident that he came to me hoping that I would confirm the opinion of his old-school physician as to the suitableness of Davos for his complaint, and when he found that my advice was entirely opposed to his going there, he evidently thought that the eminent and fashionable doctor must know more about the subject than a practitioner of a system which is ridiculed and scorned by the most illustrious representatives of established medicine.

Nor is this a solitary case of the kind. How often do patients come to us for a special object, to see if we cannot cure some affection which their own ordinary medical attendant has failed to cure; and as soon as they are cured, back they go to their allopathic doctor, of whom they never seem to lose touch all the time they are being homeopathically treated. After this they will in conversation allow that homeopathy is good for such and such a disease, but imply, and indeed show practically, that they prefer the old system for all other diseases. Or they will admit that

homeopathy is good for children's diseases, and keep, or allow their homeopathically-inclined wife or nurse to keep, a box and book for nursery practice, but for their own complaints they always call in an allopath, and even do the same for any serious disease of their children. Perhaps the cause of this is that they have always heard homoeopathy so much ridiculed and its practitioners denounced as unscientific and disreputable quacks, that they have come to believe the misrepresentations of our allopathic colleagues. who, they think, must be, as they always say they are, the only truly scientific and honest practitioners, as they are in such a large majority and enjoy all the conspicuous posts and emoluments in the profession, and are invariably summoned to treat the serious illnesses of the At least the newspapers, as a rule, only mention the name of the doctor in attendance on a great man when that doctor happens to belong to the dominant school. When the doctor happens to belong to our school, the rule which forbids the blazoning of a physician's name in the papers is severely observed. It is provoking to us to hear patients whom we have brought through some dangerous or serious disease after allopathy has failed, coolly talk of their old unsuccessful attendant as "my physician." We feel that we have only been consulted for a temporary emergency, and that as soon as this is passed the patient will again have recourse to the system that could not cure this particular complaint, but is considered good enough for others. A ludicrous instance of this ungrateful dislike to homocopathy was told us by an old colleague. A lady, who had been suffering for many weeks from diarrhoa, which several eminent and titled doctors had failed to relieve, was persuaded to send for our colleague. He mixed some Veratrum in a tumbler, and told her to take it by spoonfuls every two hours. He heard nothing more of the case for several weeks, when, meeting one of the lady's daughters. he inquired how her mother was. "Mamma is quite well," she replied; "after two or three spoonfuls of that stuff you mixed in the tumbler her complaint ceased entirely, but she thinks it must be satanic agency, and does nothing but abuse homoeopathy ever since." This of course is an extreme case, but it is not uncommon to find persons who have benefited by homoeopathic treatment speaking disparagingly of it, and as though they were rather sorry it had proved successful when the "regular" system had failed. We are

ranked in their minds with bone-setters, herbalists, and other irregular practitioners. Again, some persons will suffer the homeopathic treatment of some members of their family provided this is done clandestinely. A few months ago a lady came to see me, and wished me to attend her. This I did for some weeks. She gradually improved, and I was thinking of discontinuing attendance when I received a note from her husband to the following effect: "Lord and as his lordship (whose dignity was only a few months old) could not bear to be known to his neighbours as employing any physician who did not belong to the hierarchy of the established medical creed, he dismissed his wife's revolutionary practitioner with a minimum allowance of courtesy. I have known persons whose families I have attended for many years with unvarying success suddenly, and without warning or apology, transfer the medical care of themselves and families to some fashionable practitioner of the other school. In such cases a long experience of homeopathic treatment seemed to produce no impression on the mind that homeopathy was a better method than The idea seemed to be, one medical system is as allopathy. good as another, and as we wish to be very fashionable, we will rather have a doctor who belongs to the school which enjoys the favour of the Court and receives all the rewards and honours of the profession, than a practitioner of that school which must be of an inferior caste, as its practitioners are excluded from all the hospitals and medical societies, the Court appointments and public offices. And so we are quietly dropped with no more ceremony than is used in changing from one grocer to another. The persistent misrepresentations and calumnies of the old-school practitioners have had the effect of producing a very general impression among the public that somehow or other we are not duly qualified, or that we are not scientifically educated, or that there is altogether something wrong, if not disgraceful, in the practice of homocopathy. True, we often cure where orthodox practitioners fail, but somehow the remedies we employ are not of the legitimate or authorised sort, and so, as soon as our services are performed and the disease for which we are consulted is cured, we are unceremoniously dismissed, and the "regular" practitioner restored to his post as family physician.

Every homoeopathic practitioner has had more or less of this sort of experience. It is intolerable, but there is, and can be, no help for it until the non-medical part of the community are thoroughly instructed. They must be taught that we have passed through the same colleges and universities, and possess the same degrees and diplomas, that we have received precisely the same scientific instruction as our orthodox colleagues, and in addition have studied a method of treatment that requires a great deal of labour and application; that there is nothing secret, underhand, or dishonourable in the practice of homeopathy, and that it is a truly scientific method, and vastly more successful than any other method They must also be made aware of the causes that have kept the profession from adopting homosopathy in larger numbers. To effect this some such organisation as the Homosopathic League is required; and this, if well supported by the outlawed homoeopathic practitioners, will soon improve their position, and effectually counteract the unfair methods that have long been adopted by the members of the old school to discredit us with the public.

To return from this digression to the case of the gentleman who died at Davos. It is strange that a physician of repute should have been so confident of the suitableness of Davos in a case like this, where the fatal result showed that it was absolutely unsuitable. Fashion, rather than knowledge or careful consideration, must have led him to send this poor fellow to Davos. Of course none of us are infallible, not even—as the late Master of Trinity would have said—not even the youngest of us; still, I think that common-sense and judgment derived from even moderate experience might have prevented this physician from making such a lamentable

mistake.

I think that practitioners are, as a rule, too fond of ordering their patients away to foreign Curorts. It should be remembered that Curort does not mean a place of cure, but only a place of treatment, which is a very different thing. Treatment does not always imply cure, but very often the reverse. There are health-resorts in this country which are quite equal, and some superior, to any on the Continent; and there are frequently risks to be run in travel abroad to which those who remain in Britain are not exposed. Within my own experience I have known many patients return from a sojourn in some continental Curort with bloodpoisoning, fevers, dysentery, and other ailments, brought on

by impure water, bad drainage, and malaria; and probably many a tombstone in foreign churchyards might truly bear the celebrated inscription, "I was well, I would be better, and here I am." I have a patient who, two years ago, went to Aix-les-Bains for rheumatism, and was laid up at a wretched little town in France for three months with typhoid fever and its consequences. Another, who went to Homburg for her health, came back with symptoms of blood-poisoning, which kept her ill for a long time; and I have had several patients suffering from malarious fever contracted during their travels in search of health. Experience of this kind has made me very cautious about recommending patients to go abroad. I never do so if I think there is any place in this country which is at all likely to be suitable. A story is told of a dying bishop whose faithful valet was endeavouring to console his last moments by speaking of the joys of paradise and the high place that would be given to his lordship in consideration of his eminent piety and virtues. "I know, John," said the holy man, "you mean very well, but after all, John, there's no place like old England." So I think, with regard to most patients, there's no place like old England; they may easily go farther and fare worse. In this country we can generally get pure water and good drainage, and, though there are not such high hills as on the Continent, there are varieties of locality suitable to all constitutions. And even in the matter of mineral waters there are few Continental ones that have not their parallels here, and there are several in Britain which are quite unique and have no corresponding Brunnen on the Continent, but, being easily got at, are not so much appreciated as inferior foreign springs of difficult access.

## SABADILLA IN HAY FEVER.

By C. L. TUCKEY, M.D.

For some years it has been my practice to give Sabadilla in suitable cases of hay fever, and I have frequently seen great relief obtained from it. Dr. Bayes had a high opinion of its virtues in this disease, and in his Applied Homeopathy says that he has made many converts to our system by using it successfully. Though reckoned as a minor disease, hay fever must render the life of persons afflicted with it almost unbearable for three months in the year, and as during those months nature is at her loveliest their case

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seems all the harder. Dr. Blackley, in his exhaustive work on the subject, does not seem to attach much value to any drug in the treatment of hay fever, and allopathic authorities

get no further than Quinine and local measures.

It must be confessed that after reading how the symptoms are caused by microbes, or, according to another authority, are nearly always consequent on deep ulceration in the nose, which must be got at locally, one feels a little shy in giving the millionth of a drop to combat such a very material foe, but we homeopaths get accustomed to this sort of thing, and in spite of changes in pathological theories we still find our remedies unchanging in their efficacy, and that with therapeutic faith we can still remove mountains of disease.

Miss J. R., aged eighteen, consulted me on June 7th, 1886, for hay fever, from which she had been a sufferer from early childhood. She comes of a decidedly scrofulous family, many of its members suffering from eczema, others from asthma, and her father and father's sister from hay fever. Miss R. has been under several different kinds of treatment, and has tried nearly all the advertised remedies without result. Hitherto the only summers she has escaped her enemy have been passed by the sea, far away from pollen-bearing

vegetation.

Her attacks are attended by but little sneezing, but there is continual streaming of clear fluid from the nostrils, swelling of the nose and eyelids, and redness and inflammation of the conjunctive. Her sufferings are constant, but there is always a great aggravation in the early morning. She would go to bed tolerably comfortable, but would wake about 3 a.m. to find her eyes entirely closed by the swelling of the lids and feeling like hot coals, and the nose swollen, stinging, and discharging profusely. This state of things would continue for three or four hours, and then, thoroughly exhausted, she would fall into a troubled sleep, from which she would awake somewhat better, but feeling languid and good for nothing all day. As the summer progressed the disfigurement of the face would increase, until it was always so swollen and shapeless as to render her staying indoors compulsory. On the occasion of her first visit she had already had three bad nights, and the nose and eyes were a good deal swollen and inflamed, but she said their state was nothing to what she expected them to be in a few days. lives in a flowery suburb, and in describing her tortures in passing hawthorn trees in bloom compared the sensation. caused to that of smelling cayenne pepper. All odorous flowers, as well as grass and hay, bring on attacks or cause aggravations. I prescribed Sabadilla 3, one drop three times a day. At the same time I ordered as an adjunct an ointment of Quinine and Carbolic Acid for local application to the nostrils.

June 15.—Miss R. has passed a more comfortable week than she has had for years in London at this season. There was only one attack during it, and that she attributed to having worn roses in her dress. The ointment, however, was a complete failure, and she only used it twice. It then brought on violent sneezing and headache, and so we discarded it and continued the Sabadilla alone.

June 21.—Further improvement. There have been no bad attacks during the week, but after exposure to the hot sun or over-fatigue a smarting sensation has been felt in the nose followed by a discharge of thin fluid. These symptoms have arisen two or three times, but have passed away in about ten minutes instead of getting worse and lasting for many hours. She looks healthy, and the eyes are quite clear. Continue Sabadilla.

The following week a slight cold and loose cough caused the substitution of *Ipecacuanha* for *Sabadilla*, and then the patient reported herself as cured.

During the rest of the summer she got on well without medicine, and was entirely free from hay fever. Sometimes in passing through a hayfield, or after being exposed for a long time to a hot sun, premonitory symptoms showed themselves, but they never developed into more than a very slight and brief coryza.

The rapidity with which this intractable affection yielded to the proper remedy; the cure of the symptoms by constitutional medicine though the exciting causes were not removed; and the apparent heredity of the disease, which is not generally remarked, are, I think, interesting features in this case.

14, Green Street, Grosvenor Square, October, 1886.

# SOCIETY'S MEETING.

#### BRITISH HOMOPOPATHIC SOCIETY.

SECOND Ordinary Meeting of the Seciety, November 4th, Dr.

Hughes, Vice-President, in the Chair.

DR. COOPER read his paper entitled Typical Examples from Practice of Three Principal Forms of Deafness, with Special Reference to Treatment.

Dr. Cooper began by referring to his work on Vascular Deafnoss, published by Baillière, Tindall, and Cox, to justify his division of the deafnesses into three great groups—obstructed, nervous, and vascular. The two former he said were marked by suddenness of onset; the last was always slow in its pro-He termed the pathological process vasculitis, and described it as a diffused irritation of the vascular system of the ear, any sudden increase of which would occasion acute otitis. Under the head of Nervous Deafness Dr. Cooper mentioned the case referred to at Bâle of a lady, living near London, who, when living alone in a large house, was startled by footsteps which she imagined to be those of robbers. Her body became rigid, and all sense of hearing disappeared. After a few hours in this state the deafness left as fast as it came. Dr. Cooper ascribed this to shock. One of the speakers at Bâle asked if it were not hysterical. Dr. Cooper did not distinguish between hysterical and nervous deafness. A second case under this head was the following: Miss T., aged seven and a-half, much troubled with pain in left ear for two or three weeks, supposed to have been caused by a decayed tooth extracted two weeks ago. Ear had discharged the last few days. Shortly before the tooth was extracted, and whilst it was giving trouble, a bit of mud flew up from a passing cart and struck somewhat forcibly against the ear. It pained that evening after her return home and was poulticed. This brought on discharge, but failed to lessen the pain. Dr. Cooper found the ear discharging; the watchtick was inaudible except on contact, and there was thus every appearance of a serious injury having occurred. But on gentle stimulation by acupuncture applied to the side of the neck, without any attempt being made to inflate the tubes, in three minutes the hearing became normal. The cause of the deafness here was shock either from the extraction of the tooth or the impression made by the mud. This kind of deafness is readily removable by stimulation of the sympathetic ganglia in the neck.

All cases are not so simple as these. Nervous deafness is met with in persons whose hearing is in health over-sensitive; it often affects one side only, and may be accompanied with other nervous symptoms. The loss of hearing goes by leaps and



bounds; is generally traceable to mental strain or worry. The drums are bloodless and transparent; the malleus handles and small processes white and delicate-looking, thus contrasting with vascular deafness. In mild forms Gels. 3 is very effective; but in advanced cases, where patients have suffered from prolonged mental distress, continuous or paroxysmal, neurotic remedies are powerless, but Magnes. Carb. 200 (Lehrmann) is most efficient. The special indications are: -Fits of absolute powerlessness on hearing unpleasant news; sudden seizure of deafness and vertigo or tinnitus (musical); local numbness or paralytic feelings increased by bad news; the patient cries easily. complains of pain, often numbness on the top of the head; the left ear is the worst; marked tendency to faint at monthly illness; suitable patients are generally dark-haired. Here is a case:-Susannah Basle, 47, admitted May 8, 1886. Deaf twelve years from grief; husband laid up an invalid six years; treated at St. Bartholomew's two or three years. Deaf both sides; very giddy; pain on right side of head when she has trouble; tinnitus as from machinery above left ear; dreadful noise in head, and pains over left eye; filthy taste in mouth, spits up blood every morning. Membranes thickened, surface smoothlooking. Hearing only on contact on both sides. She improved a little under Ign. 3x trit., and more under Magnes. Carb. 30. but it was not till Magnes. Carb. 200 was given that the condition was fairly grappled with. Sudden giddiness, faintness, dimness of eyes, and blood-spitting disappeared whilst taking the medicine, tinnitus and headache much improved, also hearing.

Vascular Deafness.—Dr. Cooper pointed out that some cases were curable and others were not, and that the curable cases were marked by an eczematous condition of the drums. Case I. Alfred Carter, 23, shopman, deaf more or less all life; treated without benefit at St. Bartholomew's Hospital; admitted June 26, 1886. Hearing 20, on right, and C (contact) on left. Wax in left ear left untouched. Right membrane moist-looking, with dirty-looking moisture in meatus. Under Mezer. 3 he steadily improved, and heard 40 on left before removal of the When this was removed he heard no better, but the drum was found eczematous like the right. Dr. Cooper observed that, though this was a hopeful symptom, it was no use to set up the condition artificially in the cases where it did not already exist. Case II.-W. H. Carr, 19, engine fitter, admitted June 6th, 1885. Deaf as long as he remembers; supposed to be from measles soon after birth; subject to sore throats; hears best in a noise. Mother, sister, and brother deaf. Much granulation in post-nasal region and ozenic discharge. Foul breath. No history of ear discharge. Roaring noises as of blood rushing past the ears. Both membranes ansemic and thickened, hearing R. 1 in., L 5. Forrum. Picric. 6x and 1-50th solution gave

relief, and Manganum Acst. 3x in pilules completed the cure. In this case, though there was no aural discharge, and so, according to Dr. Cooper's theory, little hope of benefit, cure ensued. Dr. Cooper explained it by saying that the condition of the Eustachian tubes was analogous to eczema of the drum. Dr. Cooper thought Dr. Carroll Dunham's case of cure of deafness by Meser. 30 was one of vascular deafness with eczema of the drum.

#### DISCUSSION.

Dr. Hughes having opened the discussion,

Dr. EDWARD BLAKE asked Dr. Cooper if he had found Actas Rac. useful in tinnitus, or had observed that cigars and tea caused it. Bovista was not mentioned, though very useful in eczema of the meatus. He asked if Dr. Cooper had noticed affection of the heart in his cases of vascular deafness.

Dr. CARFRAE considered cases of deafness as generally very hopeless. He asked if Dr. Cooper found the hereditary cases

more untractable than others.

Dr. Shackleton found liquor carbonis detergens most effective in eczema of meatus and auricle. He asked about the dilutions in which Dr. Cooper used Arnica, and said he thought the distinction between vascular and nervous deafness rather a fine one.

Dr. Cook mentioned the case of a gentleman who had eczema of third and fourth fingers from an accident to the ulnar nerve, and asked if eczema of the meatus might not be associated with defective nerve action. Dr. Woakes traced ear disease in many cases to affections of heart and stomach through the nerves. Dr. Cook asked about the chemical constitution of the 200th dilution

of Magnes. Carb.

Dr. Dudgeon said that, in his early youth, before he commenced the practice of medicine, he went to Berlin and studied ear diseases under the renowned Kramer. He learned all that that celebrated professor could teach about the treatment of ear diseases. He returned to England with his book and a complete assortment of instruments. He faithfully carried out Kramer's modes of treatment, but he never met with the success promised by him in cases of nervous deafness. In those caused by catarrh he found that blowing out the mucus by means of the Eustachian catheter restored the hearing, but only temporarily. Only when the catarrh was cured did the deafness go away permanently. He was considerably surprised to find when, some years later, Kramer published another book, all the modes which he had taught and recommended as the best for nervous deafness he denounced as useless and injurious. He did not know why Dr. Cooper mentioned only three kinds of deafness, for there were several other kinds of equal importance. He had several years ago treated a pianist, who complained of hearing

every note, though correctly played, as discord. After a short course of Saliculic Acid and Quining she quite recovered her hearing, and was able to go on with her professional duties. short time ago, however, she came to him worse than ever, and in a bad general state of health. As before, she complained that music was to her a most horrible infliction. She was much better, though her hearing was not yet sufficiently restored to enable her to follow the duties of her profession. There were many diseases of the ear accompanied with sounds which could not be referred to the vascular system of the ear. There were diseases accompanied by loud noises in the vessels of the neck when no noise was heard by the patient; on the other hand, he had examined several cases of tinnitus where he could not detect any sound in the vessels of the neck. He also thought that the term deafness should be confined to absolute inability to hear, and hardness of hearing ought to be used to express

any short of absolute deafness.

Dr. Hughes (in the chair) said that while he did not agree with Dr. Blake in objecting to the term vasculities, which was at least as admissible as ovaritis, he doubted the pathological theory it embodied. Dr. Cooper had well made out the relation of certain forms of deafness to the circulation of the ear, but he (Dr. H.) would regard the inflammation present as seated in the tissues outside the vessels rather than in the vessels themselves. Again, in cases of deafness arising from syphilis or ordinary senile decay, he thought it very unlikely that the mischief was primarily vascular. In addition to the medicines Dr. Cooper had mentioned, he would draw attention to Carboneum Sulphuratum (the old "alcohol sulphuris"), the pathogenesis of which in the forthcoming number of the Cyclopædia would show a power of causing deafness and tinnitus quite equal to that of Quinine and Salicylic Acid. As to Gelsemium, which had been referred to, he was doubtful, as with Conjum, whether it acted on the sensory nerves at all; and whether its dim vision was not due to interference with the vascular apparatus of the eye; whether, therefore, in deafness it would not be better when hearkening was at fault rather than hearing. He was surprised Dr. Cooper had not used Phosphoric Acid in chronic nervous deafness from depressing causes. In the case treated by Dr. Carroll Dunham, which Dr. Cooper had referred to in his paper, the dilution which Dr. Carroll Dunham had used was the 30th, not the 200th. Did not the incurability of deafness without obvious structural change depend on the real seat being the internal ear?

Dr. Noble commented on the difference between vascular and nervous deafness, and thought that the fact of hearing more plainly in a noise, which some patients experienced, was indicative. He had classed such cases as nervous, calculating that the noise acted as a stimulant on the ear. He thought the distinction

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tion between nervous deafness and vascular deafness was a very fine one, and referred to a case of deafness arising from gout, which he thought was an instance of vascular deafness. He had treated cases with *Iodide of Potassium* and *Salicylic Acid*, but thought such cases very intractable, especially when there

was an eczematous thickening of the meatus.

Dr. Cooper, in reply, expressed the great satisfaction he felt at the interesting discussion elicited by his paper, especially as the subject is not one in which medical men usually interest themselves. Dr. Blake had mentioned some remedies-Actes rac., Tabacum, Tea-which he had seen produce tinnitus aurium; this he could confirm, but a very large number of our remedies exert a like effect. Dr. Blake had mentioned Bovista as having been much used by his father in eczema aurium. Dr. Cooper had not had any experience with it, but wished to insist that the condition set up by eczematous states of the meatus rendered the accompanying ear-symptoms readily removable by the indicated drug. In reply to Dr. Carfrae, he admitted that Ignatia might have exerted an influence in his nervous case, even after discontinuance; but the efficacy of Magnesia Carbonica 200 did not rest upon this case, but upon his (Dr. Cooper's) experience with it for many years. Heredity in no way interfered withspeaking generally—the curability of deafnesses. In reply to Dr. Shackleton, Dr. Cooper considered that accidental deafness ought to be classed, as stated in his paper, with nervous deafness, except where manifest tissue destruction existed. Nervous deafness certainly very often does not appear to come on suddenly; this, however, is its tendency, as can be elicited by the way in which the deafness comes and goes; but this is only observable upon close inquiry. Vascular deafness is proved not to be a nervous deafness by its history and its intractability to medicines. Dr. Cook referred to the usual objections to a 200th dilution, with which Dr. Cooper heartily sympathised. He was present, however, to state a fact, and this he did independently of theory. Dr. Hughes was quite right in saying that cellular and other tissue besides the vascular structures were affected, especially in syphilitic deafness. Dr. Cooper remarked, particularly of syphilitic deafness, its proneness at a very early stage to abolish interosseous hearing, more so than any form of deafness. He was pleased to hear of the action of Bisulphide of Carbon, and would thoroughly test it; *Phosphoric Acid* in nervous deafness he had used but seldom. Dr. Noble had spoken of the symptom, "hearing better in a noise," which he would find discussed in his (Dr. Cooper's) work on Vascular Deafness. Dr. Dudgeon had referred to the inutility of all the old-school methods of treating deafness, and of the absurdity of calling every case of hardness of hearing a deafness. This last he (Dr. Cooper) had touched upon in his work, but the question of the curability of ear cases might well be left for the present out of discussion.

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# DIETETICS.

# A FEW WORDS ON THE DIET-TREATMENT OF GOUT.

By John Kent Spender, M.D. Lond., Physician to the Mineral Water Hospital, Bath.

(From the "Practitioner" for May.)

(Continued from p. 517.)

The habits of any one predisposed to gout ought to be simple and active. The "constitutional walk" is a daily duty; and all exercises and sports should be practised which strengthen the muscles and confirm their tone. Nothing is to be done, however, which causes exhaustion or more than a healthy fatigue. The mental powers need occupation and diversion; but evening meetings and amusements must be rare and early. A proper amount of sleep is important. There should be morning bathing in either cold or tepid water, according to weather, age, and resisting power of the system. Turkish baths are sometimes useful. Limbs should be shampooed, and gouty joints manipulated. Woollen clothing ought to be worn all the year; and with well-fitting shoes and woollen stockings the feet can be kept always dry and warm.

Mineral waters stand in a sort of intermediate position between diet and medicine. The internal use of hot mineral waters may be called thermal food, if guided by tact and experience. This is not the place to discuss the external and internal application of the Bath thermal waters; but no one can doubt

their great usefulness in proper cases of chronic gout.1

An equable and temperate climate moderates gouty phe-

nomena, and encourages a steady action of the skin.

If we honestly believe in the influence of the quantity and quality of the daily food-material, we shall try with enthusiasm to make our patients sharers in this belief. And they will not refuse a practical assent, if we demonstrate such a rational and easy way of doing themselves good. The voice of authority, gathered from the "clinical method," ratifies the conclusions of modern knowledge. We need not consult a heap of buried lore,

<sup>1</sup> Dr. Beissel, of Aix-la-Chapelle, has investigated the action of douches and baths. He finds that the excretion of urea and uric acid is greatly increased by the application of douches, and that there is a diminished production of both as an after effect of the baths. Quoted in the Practitioner, June, 1884. On the special use of the Bath waters in gout, the writings of Scudamore, Gibbes, and Barlow may be consulted with advantage.

I commend to the attention of my brethren a plan of treatment suggested by Dr. Lauder Brunton, of allowing copious draughts of hot water at intervals during the day. A rather rigorous discipline of diet is enforced at the same time. It is said to be very useful in obstinately recurring gout. (Practitioner,

May, 1884.)

but simply quote the teaching of three good strong men whose words and practice have been a treasured memory among a host of physicians during the present century. Dr. J. Mason Good advised a "due and unswerving attention to the general rules of hygiene;" and "when the diet has been too rich, it must be lowered." Dr. Copland speaks of the necessity of an "abstemious diet, and a small quantity of animal food." And Sir Thomas Watson distinctly says that the treatment of a gouty patient "must be chiefly regimenal. The instances are not few of men of good sense, and masters of themselves, who being warned by one visitation of the gout, have thenceforward resolutely abstained from rich living, and from wine and strong drinks of all kinds, and who have been rewarded for their prudence and self-denial by complete immunity from any return of the disease; or upon whom, at any rate, its future assaults have been few and feeble."

A great bishop of our church writes of the present day as one of "doubt and controversy, when all creeds are challenged and all opinions disputed." It is right that every creed and every opinion should pass through the crucible of the refiner, whether he be philosopher or logician. But it after the refining process nothing be counted valuable or safe, I do not see how truth is ever to advance. No art craves for stable ground to rest upon more than the art of medicine. Uncertainty is the nurse of empiricism. If we are to be told that what has been sanctioned by authority and verified by experience is no better than a "tinkling cymbal," we shall operate with faltering hand in every department of our work, for the imposing structure of to-day may be a crumbling ruin to-morrow. My plea is that, so far as diet is concerned, the therapeutic doctrine of gout is invulnerable. The treatment of this disease has been too much shrouded in mysteries and subtleties, and the mists ought to be driven away. The central principle is as clear as anything else which Oliver Wendell Holmes calls a "mother-idea," itself being both parent and child of many luminous points and landmarks in the science of healing. We protest against the removal of any landmarks and lighthouses; we ask for more rocks and fewer shifting sands. And on every bit of territory rescued from the tides of "controversy and doubt" we may tread with a sure and firm foot, never losing grasp of the qualities of "gentleness, fineness, and felicity."

 $<sup>^{1}</sup>$  Study of Medicine, edited by Samuel Cooper, fourth edition (1840), vol. ii., p. 301.

Dictionary of Practical Medicine (1844), vol. ii., p. 59.
 Lectures on the Principles and Practice of Physic, third edition (1848), vol. ii., p. 702.

# REVIEWS.

# THERAPEUTICS FOUNDED ON ORGANOPATHY AND ANTIPRAXY.

WE are glad to welcome a new volume from the pen of our venerable colleague, Dr. Sharp. The six essays it contains display all the qualities of his former essays-vigorous, pugnacious writing, contempt for all previous systematists, including Hahnemann and all his disciples, a naïve ignorance of almost all that has been written by the exponents of homoeopathy, combined with a conspicuous familiarity with much ancient and modern literature, denunciations of hypothesis and speculation, insistence on reliance on facts alone, and promulgation of another brand-new system purely hypothetical and unsupported by any facts worth mentioning. Dr. Sharp says (p. 41): "I have never ranked myself among the admirers of Hahnemann." That is true, and we have often wondered why Dr. Sharp in his essays and elsewhere has so persistently endeavoured to belittle the great physician to whose labours he is indebted for the treatment he practises, and without whose labours, and those of his faithful disciples, Dr. Sharp could not practise as he does. The explanation is that Dr. Sharp has, as he thinks, discovered a new method of treatment, a new system, which is, he believes, destined to supersede both allopathy and homoeopathy, and so, as a rival systematist, he naturally endeavours to depreciate the founder of the system he wishes to supersede. He calls his system "Antipraxy." What is Antipraxy? "Antipraxy expresses the fact that certain larger and smaller doses of the same drug act in contrary directions" (p. 127). It is "a practical basis for therapeutics" (p. 129). "explains the success of homocopathy." It is "true antipathy" (p. 137). It is "a guide to the choice of the dose" (p. 138).

Antipraxy, then, postulates the contrary action of large and small doses of medicine. Applied to therapeutics it is the treatment of disease the phenomena of which resemble those caused on the healthy by large doses of medicine with the same medicine in small doses. Its therapeutic rule is contraria contrariis, because the action of the small dose is the contrary of that of the large dose which resembles the phenomena of the disease. That a medicine which causes in the healthy certain symptoms will, in small doses, cure or remove those symptoms is undeniable, otherwise the rule, "Let likes be treated by likes," would be futile; and many have held that while the rule is similibus, the actual curative process, as far as the reaction of the organism is concerned, is contraria contrariis. This is, of course, quite different to Dr. Sharp's hypothesis, and

<sup>1</sup> Therapeutics founded on Organopathy and Antipraxy. By William Sharp, M.D., F.R.S. London: Bell, 1886.

is an innocent opinion with regard to what occurs in the homoeopathic cure that does not in the least impugn the

accuracy of Hahnemann's therapeutic rule.

But we deny, in limine, that large and small doses of medicine act on the healthy in contrary directions. And, first, what are large and small doses? This Dr. Sharp nowhere tells us. All he says is: "Among the smaller doses nothing smaller than the third centesimal dilution is included." But what is the other limit of the small doses? And what are the large doses? Does the scale of large and small doses differ with the different medicines? Is a grain of arsenic a large dose and a grain of calcarea a small dose? Is a drachm of tincture of dulcamara a small dose and a drachm of tincture of the allied belladonna a poisonously large dose? If the large and small doses are only conditional, depending on the quality of the drug and the sensitiveness of the subject to whom they are given, what precision or fixity is there?

But, as we have said, we deny altogether that large and small doses produce contrary effects. Each medicine produces its own specific effects, excites in fact an artificial disease, in every dose capable of acting on the healthy subject experi-There is no question of opposite or contrary mented on. action of different doses. If the dose, whatever it be, acts at all, it produces its own specific effects in greater or less intensity, wherein it differs from all other medicines. mercury in large doses causes sore gums and salivation in the healthy, and very small doses will often cause the same symptoms in persons who have never had mercury in large doses. Thus we have seen salivation, sore gums, and loosened teeth occurring after doses of the third and sixth attenuations. The opposite action of small and large doses of one drug is an erroneous deduction from some isolated symptoms or parts of symptoms belonging to the specific action of the drug. Sharp refers to sundry trials of his own with "small" and "large" doses of different drugs, which he thinks conclusive as to the opposite action of these doses. These experiments relate chiefly to the action of substances like aconite and digitalis on the pulse. The experiments, as regards digitalis. have been repeated by others, notably Dr. Nicholson and Dr. Dudgeon (British Journal of Homospathy, xxxix., 279), with altogether different results. But, supposing Dr. Sharp's experiments proved that the large and small doses of these remedies caused variations of a few beats per minute, that is all they show, but they tell nothing about any variation, far less any contrariety, in the quality of the beats. The quality of the beats is ascertained by the sphygmograph with unerring accuracy, and, to prove that any contrariety exists, the sphygmograph should be used. The present writer has carefully

examined the character of the pulse-beats by means of the sphygmograph, and has found that this character remains absolutely unaltered after the administration of small and of comparatively large doses of aconite and digitalis. There is, therefore, no contrariety in the character of the pulse after these doses. The alterations, supposing that they occurred, of the velocity of the pulse, were they even greater than observed by Dr. Sharp, would apply only to one single element of the pulse-beat, and therefore to the mere fragment of a symptom. But what of the other phenomena of the drug-disease? prove a contrary action of large and small doses the whole picture of the drug-disease must show this contrariety, and not a mere fragment of one of its most variable phenomena. In this sense there is no contrariety whatever between the specific effects of a drug whether developed by comparatively large or comparatively small doses. Every drug has its specific action. its specific affinities for various organs and tissues of the organism, and this specific action is produced sometimes by single or several large doses, sometimes by frequent small doses.

Dr. Sharp objects to Hahnemann's system on account of the vagueness of the principle, which he says "is thus expressed: Similia similibus curantur—likes are cured by likes." Formerly (Essay 4) Dr. Sharp more correctly translated the formula: "Likes are to be treated with likes." But Hahnemann's formula is not that, but similia similibus curentur—let likes be treated by likes. This is not an explanation of a mode of action but a therapeutic rule, and there is nothing vague in it. It implies, as all the world knows, that diseases are to be treated by drugs that are capable of producing on the healthy an array of morbid phenomena similar to those exhibited by the disease. Dr. Sharp says Hahnemann "has made it (his rule) to depend on a mere hypothesis," which is the reverse of fact. Hahnemann's rule is a true induction from observed facts, and is independent of any hypothesis. Hahnemann, it is true, latterly attempted to explain how medicines acted in the cure of disease when given according to his rule, but he distinctly says (Org. § 28) that he attached no importance to this explanation, and, like all other attempts of the same sort, it has not proved satisfactory. The truth of his rule is quite independent of the correctness of the explanation.

Dr. Sharp repeats over and over again that his new doctrine of antipraxy is no hypothesis, but a true induction from observed facts. But it is evident that it is nothing but a hypothesis resting on no basis of fact worthy of the name. From a very limited number of observations of the supposed effects on his pulse of various doses of a few medicines Dr. Sharp jumps to the conclusion that small doses invariably produce a contrary or opposite effect to large doses; and that the rule of treatment is to give

small doses of a medicine in a disease whose phenomena correspond to the effects of large doses of that medicine on the healthy; when it cures the disease by its contrary action. But he does not tell us, nor can he tell us, what are small doses and what are large doses, and it is evident that doses are relatively large or small according to the kind of drug and the sensitiveness of the organism. That is vague enough in all conscience. Then he has no materia medica or record of the effects of medicines except the materia medica of Hahnemann and his disciples, and as he tells us that the medicines of this materia medica were proved in all kinds of doses, large and small, the effects from the different doses being seldom distinguished, how can he apply his rule and give his remedies in small doses only in cases where the disease symptoms correspond to the effects of large doses? his only materia medica giving him, as he believes, no information as to what are the pathogenetic effects of large, what of small He says medicines must be proved in both large and small doses. But why? As he repeatedly says that large doses to the sick are uncertain and generally hurtful, he only wants medicines to be proved in large doses in order to give for curative purposes his oppositely-acting small doses. But here again we are met with the difficulty, what are large doses?

Let us examine some of the illustrations of his system Dr. Sharp gives. At page 165 he says: Triturated mercury in 1-100th of a grain; tincture of china, chamomile, myrica, each in 1-100th of a drop, and lycopodium in 1-1000th of a grain, increase the quantity of bile in a healthy person, and "they have been given successfully as remedies in sundry disorders of the liver." Of course, as these are the effects of small doses on the healthy, according to his rule they should be given as remedies in small doses for opposite states, viz., diminished secretion of bile. But every practitioner knows that small doses of mercury, china, and chamomile are very useful in diseases attended with increased secretion of bile. If that is so, and we could cite hundreds of witnesses to prove that it is so, what becomes of "the universal or law-fact expressed by the word Antipraxy"? We may also ask Dr. Sharp to refer us to his authorities for mercury and chamomile diminishing the secretion of bile in large doses and increasing it in small doses in healthy human beings (p. 180). As for china, we know at the present moment a lady tolerably healthy and whose liver is perfectly sound whose stools immediately become nearly white if she takes a drop of the 1st centesimal dilution of china, without any compensating darkness of urine or yellowness of skin, showing that the secretion of bile is diminished, not increased, by this 1-100th of a drop of china. Dr. Sharp alludes to his proving of titanium, which we may examine in order to see if we can therein find any corroboration of his antipraxy. He tells us

(we take the account from his letter to Sir B. Brodie published in 1861) that in 1856 he took two grains of the 1st centesimal trituration (was this a small or a large dose?) daily for a week, and the symptoms it caused were nausea, loss of appetite, and discomfort in stomach; giddiness, hemiopia, desire to keep eyes shut; "a perceptible derangement of the whole system, which could not, without danger, have been carried further." This he ascribes to some change—guessed at, not ascertained in the blood (Dr. Sharp finds fault with Hahnemann for vagueness—is this what he calls precision?); that's all. But he now tells us that in addition to these symptoms there occurred a very copious discharge of albumen from the kidneys that lasted for two years, and was eventually cured by smaller doses (how much smaller?) of titanium. It strikes us as very odd that Dr. Sharp should only in the year 1885 have discovered or remembered, or at all events mentioned, that titanium caused a two years' attack of albuminuria and eventually cured the attack itself produced. In 1861, five years after his experiment and three years after his wonderful cure, he seems to have known or suspected nothing about the power of titanium to cause and cure albuminuria, otherwise he would surely have mentioned such a remarkable fact in his letter to Sir B. Brodie when on the subject of titanium and its pathogenetic and therapeutic powers. The vagueness that distinguishes almost all Dr. Sharp's writings is conspicuous here. What kind of albuminuria was it? for we know that albuminuria attends several very different pathological conditions. What is the opposite, the "antipraxy" of albuminuria? Is the 1st centesimal trituration in which he proved titanium a large or a small dose? Judging from his illustrations of mercury, china, myrica, and chamomile given above, it ought to be a small dose, in which case, according to the principle of antipraxy, the small dose should not have cured but aggravated the disease. If, again, the 1st centesimal trituration is a large dose, what is the small dose of that medicine? We learn from the letter to Sir B. Brodie aforesaid (p. 96) that in a case which Dr. Sharp cured by titanium, being moved to prescribe it "by the vivid recollection his narrative produced in my mind of the condition I was myself falling into while proving titanium," he gave it in half-grain doses of the 1st centesimal trituration, three times a day for a week-therefore within half a grain of the quantity in which he had proved the metal. So either two grains of the 1st trituration=1-50th of a grain of the pure titanium—per diem are a large dose, and one and a half grain of the 1st trituration=1-75th grain of the metal—a small dose (and Dr. Sharp would scarcely assert that 1-50th of a grain per diem would produce albuminuria, and 1-75th of a grain per diem the opposite; - what is the opposite of albuminuria?); or if both are large or both small doses the principle of antipraxy is put out of court and the case is reduced to one of ordinary homoeopathy, which it is Dr. Sharp's aim to discredit, but to the truth of which he here bears involuntary testimony.

Possibly by this time the reader will have seen that Dr. Sharp's "antipraxy" is a fanciful speculation founded on noreliable facts, a hypothesis suggested by an imperfect observation and a misapprehension of some phenomena. It is entirely suggested by the apparent antagonistic effects of certain doses of certain medicines on Dr. Sharp's pulse, and on the alleged production of constipation or relaxed bowels by various doses of certain drugs. But, as is well known to every one who has had any considerable experience in the examination of the pulse, the alteration of its rapidity by a few beats per minute (which is all that Dr. Sharp said he observed) teaches absolutely nothing. Similar alterations may be observed in many persons who have taken no medicine and are quietly seated. A passing thought, any transient mental emotion, "expectant attention" even, will often alter the pulse by five, ten, twenty, and even more beats per minute, as we have often witnessed. To say that large doses of opium constipate and small doses relax the bowels in health is not correct. It should rather be said that large doses. constipate while small doses do not. Again, it is incorrect to say large doses of rhubarb purge, small doses constipate in health; we should say large doses purge, small doses do not There is no opposition here, merely the statement that large doses are stronger than small ones. It is the same with the effects of large and small doses of snake poison, as observed by Brunton and Fayrer, respecting which Dr. Sharp says (p. 196) that small doses coagulate the blood, while large doses keep the blood fluid; the fact being that the large doses prevent the blood coagulating after death, which is the properthing for blood to do, whereas the small doses do not prevent it coagulating—that is, do not interfere with the normal process. There is no contrary action of larger and smaller doses here; the only pathogenetic effect on the blood was caused by the larger dose, the smaller dose was not powerful enough to do the like.

Dr. Sharp says (p. 202), "I shall be reproached with having slipped away from the ground stood upon in the early essays. That I have moved forward from that ground to another which is firmer, is freely acknowledged." In our opinion Dr. Sharp has got off the line altogether, slipped down the embankment and got stuck fast in a hopeless bog of crude speculation and hypothesis. His antagonism of large and small doses is, as we have shown, a wild hypothesis unsupported by one decent fact. His notions as to what are large and what small doses are vague and indefinite and incapable of being stated with any precision. Dr. Sharp says: "Antipraxy is not Homeopathy" (p. 117),

which is very true. Homeopathy is a therapeutic rule; "let likes be treated by likes," formulated by Hahnemann after many years of patient investigation and experiment, and after the collection of thousands of facts. It is the purest specimen of Baconian induction medicine can show. Antipraxy is a crude hypothesis based on a misconception of certain fragmentary and imperfect observations, and refuted by the daily experience of every observing practitioner, discredited even by the observations recorded by Dr. Sharp himself. Though Dr. Sharp is constantly expressing his contempt for Hahnemann and homecopathy, his practice, as far as he reveals it in his writings, and even in the present volume, is entirely guided by Hahnemann's rule, similia similibus curentur. He may, forgetful of his own wise saying, "The greatest obstacles to the progress of knowledge are hypothetical explanations" (Essay 20), hold antipraxy as a speculative hypothesis explanatory of the mode in which homeopathically selected medicines cure disease, but he is guided in his selection of the remedy by the homocopathic rule alone, and it is to the genius of Hahnemann, whom he affects to despise, that he is indebted for his power to cure disease.

At p. 168 Dr. Sharp congratulates himself that in this book "a great work is here set before the medical profession. One man has done what he could, let others do the same. They will stand upon my shoulders, as I have stood on the shoulders of my predecessors." Alas! alas! "Oh, wad some power the giftie gie us, To see oursels as ithers see us!" To us it appears that Dr. Sharp has fairly slipped off the shoulders of Hahnemann, whereon he first essayed to mount; that he is floundering in the quicksands of barren speculation, and in place of feeling any wish to stand on his shoulders, we feel compassionately disposed to hold out a hand to him to help him back to the terra

firma of fact and scientific therapeutics.

The new departure taken by Dr. Sharp in his later essays we conceive to be altogether in a wrong direction. He justly blames Hahnemann for his hypothetical explanation of the homeopathic cure, and he says: "Speculation and hypothesis have been the bane of medical science in all ages" (Essay 5). He says with truth: "Such and numberless other hypotheses have been imagined by ingenious men in their closets.... and have, each in succession, been supplanted by the next invention, and sunk into contempt and oblivion" (Essay 4). And yet, unmindful of his own words of warning, he attempts in his "Organopathy" and "Antipraxy" to substitute for Hahnemann's therapeutic rule, of which he says: "We believe it to be true.... because he has shown us the proofs of its truth" (Essay 2), speculations and hypotheses as crude and unfounded as any of those he denounces. For what is his "Organopathy"

but an attempt to substitute for the morbid picture of the artificial disease caused by medicines a speculation as to the organ or. part of the body to which all the observed symptoms should be referred? The same speculative process is to be gone through with regard to the disease to be treated, and when we have satisfied ourselves as to the organ to which natural and medicinal diseases are to be referred, we then can apply the one to the And what if we should be wrong in one or both speculations? This sort of organopathy has been practised for ages with disastrous effects, and is not unknown even among fashionable physicians in our own day. The hypothetical organ credited with or blamed for the production of the morbid phenomena was at one time the spleen, then it was the liver, and as mercury was organopathically supposed to act specifically on the liver, the unfortunate patients were dosed with calomel or blue pill, often till their teeth were loosened, their gums became sore, and saliva flowed from them in streams. Exhaustion of the nervous centres and poverty of blood seem now to be the favourite hypotheses, and phosphorus, which is believed to have a specific affinity to the nervous centres, and iron, which is supposed to act directly on the blood, are the remedies given, sometimes one at a time, more often combined, as in Parrish's food, Fellows' syrup, and such-like nostrums. This is the principle of organopathy pushed to its inevitable conclusion. Rather a warning than an example, we should imagine.

Dr. Sharp finds fault with Hahnemann's Materia Medica that "nothing but symptoms appear in the provings" (p. 51). What would he have? speculations as to the organ to the derangement of which the symptoms should be referred? That would be at once to change our Materia Medica from a truthful record of what Hahnemann calls "the peculiar disease produced by every powerful medicinal substance in the human body" (Lesser Writings, p. 311) to a series of hypothetical guesses as to the pathological meaning of the symptoms. We should soon be back to the old hamatica, pneumatica, neurotica, caliaca, etc. Is this a step forward, Dr. Sharp? Is it not a woful slide backward? Fortunately, in the nature of things, provings can only consist of symptoms. But perhaps Dr. Sharp has given up "Organopathy" since it was pointed out to him that the idea and even the name are as old as Paracelsus. At all events, he says little about it in this new series of essays. "Antipraxy" completely overshadows it. But as we have shown that antipraxy is a baseless hypothesis, we cannot acknowledge it to be a step forward either. parently Dr. Sharp reads no works on homosopathy but his own, and those, it would seem, not always very intelligently; otherwise we might recommend him to study carefully Hahnemann's admirable essay On the Value of Speculative Systems of Medicine. But as of course he will not do this, we advise him Digitized by GOOGLE to read his own fifth *Essay*, in which the passage above quoted occurs, "Speculation and hypothesis have been the bane of medical science in all ages." This would be an admirable text to be hung up in the study of all who are inclined to tamper with the grand therapeutic rule we owe to Hahnemann. Of course it would not prevent men from speculating and hypothesising (is there such a word? if not, there ought to be) about the process of cure and other things, but it would warn them of the vanity of their speculations and hypotheses.

Dr. Sharp says: "I am old man, but I hope not too old to learn." But "old man," like large and small doses, is a relative term, and depends on the liveliness of the subject of it. As in this book Dr. Sharp shows no diminution of liveliness, and with the example of a German Emperor reviewing his troops at the age of ninety, and a professor in Paris working at his science with undiminished enthusiasm at the age of a hundred, we cannot allow that Dr. Sharp is an old man—relatively. We have no doubt he is not too old to learn, but we hope he is not too old to unlearn his vain imaginings about "organopathy" and "antipraxy," which we assure him will never supersede Hahnemann's homesopathy, but which, like other medical hypotheses, will speedily "sink into contempt and oblivion" (Sharp, Essay 4).

#### THE PRESCRIBER.

It is with much satisfaction that we are able to announce that the second edition of this work is now ready. We cannot, of course, comment on the work here, and we therefore content ourselves with quoting a passage from the *Preface to the Second Edition*:—

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<sup>&</sup>quot;Since the first edition of The Prescriber was published Dr. Lauder Brunton has brought out a work on Pharmacology and Therapeutics. In the "Index of Diseases and Remedies" appended to this work Dr. Brunton has signified his belief in the new therapeutics by adopting a very large number of remedies formerly unknown to the old school of therapeutics, though familiar enough to the new. But Dr. Brunton has omitted to give the special indications for the new remedies in the diseases for which he says they are useful, and has by this omission rendered his recommendations of them almost valueless. In The Prescriber these remedies are set down with precise indications for the special cases in which they will be found curative. "If the author's experience may be taken as a guide The Prescriber

<sup>1</sup> The Prescriber: a Dictionary of the New Therapeutics. Second edition, revised and enlarged. By John H. Clarke, M.D. London: Keene and Ashwell, 74, New Bond Street; Henry Kimpton, 67, High Holborn. New York: Boericke and Tafel, 145, Grand Street. 1886.

should be found of great use as a general index. Isolated cases illustrating drug-action are constantly coming under our notice and occurring in the journals, and unless a note is made of them at the time they pass out of our recollection, and when we want to find them again we do not know where to look. The author has found the margin of The Prescriber a most convenient place for making such notes. By the side of the article on the disease to which the experience refers a note of the journal or case book in which it may be found is entered, and sometimes a brief note of the case itself. The dictionary form of The Prescriber renders all such notes easily accessible.

"A glossary of medical terms—for the compiling of which I am indebted to my friend Mr. Husson—has been appended for the benefit of those readers who may not have had a medical training."

#### THE REVOLUTION IN MEDICINE.1

THE Hahnemannian oration noticed in our last issue is now ready, and may be obtained of all booksellers.

# Obituary.

## ALEXANDER PENROSE TORRY ANDERSON.

The London Homosopathic Hospital has lost a devoted servant and friend by the death of Dr. Torry Anderson, the junior member of the internal staff. For some months Dr. Anderson has acted as surgeon to the institution, and for upwards of eight years he has been connected with the staff, first as house surgeon, and afterwards as physician in charge of outpatients. His readiness to give his services to the hospital whenever desired has often been of the greatest value to the institution. His intuitive skill in diagnosis and treatment was greatly appreciated by his colleagues, and his manual neatness rendered him specially fitted for the practice of surgery. If he had possessed in corresponding degree the coarser qualities of physical strength and vital energy he would have made a much greater figure in the world. His many friends at the hospital were warmly attached to him; and now it is very difficult for them to realise the sorrowful fact that they are never to see his

<sup>&</sup>lt;sup>1</sup> The Revolution in Medicine. Being the Seventh Hahnemannian Oration. By John H. Clarke, M.D. London: Keene and Ashwell, 74, New Bond Street; Henry Kimpton, 67, High Holborn. New York: Boericke and Tafel, 145, Grand Street.

presence among them again. Dr. Anderson was educated at Aberdeen University, graduating M.B. and C.M. in 1876, and M.D. in 1879. He was in the 32nd year of his age when he died. His death occurred on the 6th of November, at 1, Lauderdale Road, Maida Vale, where he had been for some time practising, and where he resided with his mother, Mrs. Byres, to whom. with his other relatives, we offer our sincere condolence. Dr. Anderson was unmarried.

### MEDICAL AND SURGICAL WORKS PUBLISHED DURING THE PAST MONTH.

Birch (E. A.). Management and Medical Treatment of Children in India. 2nd ed. Post 8vo, pp. 434. (Thacker. 10s. 6d.)

Burnett (J.C.). Diseases of the Skin from the Organismic Standpoint. Fcap. 8vo, pp. 111. (Homeopathic Publishing Com-pany. 2s.)

Chevers (N.). Commentary on the Dis-eases of India. 8vo, pp. 810. (Churchill

Clarke (W. B.). The Diagnosis and Treat-ment of Diseases of the Kidney amena-ble to Direct Surgical Interference. With illustrations. 8vo, pp. 176. (Lewis. 7s. 6d.)

Olinical Manual for the Study of Medical Cases. Edited by James Finlayson. 2nd ed. Post 8vo, pp. 770. (Smith and Edder. 12s.6d.)
Cohn (H.). The Hygiene of the Eye in Schools. Edited by W. P. Turnbull. Royal 8vo, pp. 240. (Tompkin. 10s. 6d.)

s to the

Oreighten (C.). Contribu Physiology and Pathol Breast, and its Lymphatic pp. 234 (Lewis. 9s.) of be ds. 8vo,

Dake (J. P.). Therapeutic Methods. An Outline of Principles to be Observed in the Art of Healing. Svo, pp. 195. Bos-ton, U.S. (Homeopathic Publishing Company. 10s.)

Company. 108.)

Donaldson (S. J.). A Decalogue for the Nursery. Post 8vo, pp. 292. Boston, U.S. (Homosopathie Publishing Company. 6s. 6d.)

Dunglison (R. J.). Elementary Physical Logy. With Special Reference to Hygiene, Alcohol and Narcotics. 12mo. (Philsdelphia 9. 6d.)

(Philadelphia, 2s. 6d.)

Ellis (E.). A Practical Manual of the Dis-eases of Children. With a Formulary. 5th ed. Post 8vo, pp. 546. (Churchill. 10s.)

Ferrier (D.). The Function of the Brain.

Ferrier (I).) The Function of the Brain.
2nd ed., enlarged. 8vo, pp. 518. (Smith
and Elder. 18s.)
Hart (D. B.) and Barbour (A. H. F.).
Manual of Gynecology. 3rd ed. 8vo,
pp. 696. (W. and A. K. Johnston. 25s.)
Landoit (E.). The Refraction and Accommodation of the Eye and their
Anomalies. Trans. by C. M. Culver.
Illust. 8vo, pp. 600. (Philadelphia.
27a 3d)

37s. 3d.) Maciean (W. C.). Diseases of Tropical Climates: Lectures delivered at the Army Medical School. Post 8vo, pp. 888. (Macmillan, 10s. 6d.)

Morton (A. S.). Refraction of the Rye: Its Diagnosis and the Correction of its Errors. 3rd ed. Post 8vo, pp. 72. (Lewis. 88.)

Savory (J.). A Compendium of Domestic Medicine and Companion to the Medi-A Compendium of Domestic cine Chest. 10th ed. 12mo, pp. 400.

(Lewis. 5s.)

Contributions to Practica

Contributions to Practica (Lewis. 58.) Sawyer (J.). Contributions to Practica Medicine. Svo. (Simpkin. 6s. 6d.)
Starr (L.). Diseases of the Digestive Organs in Infancy and Childhood. With Chapters on the Investigation of Disease

and on the General Management of Chil-dren. With Coloured Plate and other Illustrations. 8vo, pp. 380. (Simpkin.

12s. 6d.)
Stille (A.). Cholera: Its Origin, History,
Causation, Symptoms, Lesions, Prevention and Treatment. 12mo, cioth, pp
163. (Philadelphia. 6s. 6d.)

# SHORT NOTES. ANSWERS TO CORRESPONDENTS, PTO.

ALL literary matter, Reports of Hospitals, Dispensa-Review, should be sent to the

Editor, Dr. CLARKE, 15, St. George's Terrace, Gloucester ries, Societies, and Books for | Road, South Kensington, S.W. All advertisements and business communications to be sent to Mr. C. MILLER, 12, Warwick Lane, Paternoster Row, London, E.C.

Notice.—We intend always to go early to press, and would therefore beg that all literary matter and correspondence be sent to us not later than the 12th of each month. Proofs will be sent to contributors, who are requested to correct and return to the Editor as early as possible.

MESSES. WIGG AND POOLE, Wholesale and Retail Homocopathic Chemists and Importers, of Adelaide, South Australia, are represented in London by Mr. Herbert Bishop, 29, Ludgate Hill, E.C.

Dr. Roth.—Dr. Roth begs to inform his colleagues that he has returned from the continent. He resumes his professional duties on December 1st. We are happy to welcome Dr. Roth back again to town. The British Homesopathic Society has missed the genial presence of its ever faithful president.

#### CORRESPONDENTS.

Communications received from Dr. Hansen, Copenhagen; Dr. Dudgeon, London; Mr. Meredith, Sydney; Dr. Roth, Divonne; Mr. E. A. Cross, London; Dr. Tuckey, London; Dr. Cooper, London; Dr. Pope, Tunbridge Wells; Mr. John Hoskin, Malta.

# BOOKS AND JOURNALS RECEIVED.

Allgemeine Homöopathische Zeitung.—Zoophilist.—Ameri-

Homosopathist - Medical Counsellor (July, "Com-mencement Number," August, and October).-September, Monthly Homeopathic Review. -Homöopatische Monatsblätter. — New York Medical Times.—St. Louis Periscope.— Clinique.—Medical Visitor.— Chemist and Druggist.—Hahnemannian Monthly.—Medical Era.—Medical Annals.—The Clinical Review.—Homcopathic Physician.—Homcopathic Recorder.—L'Art Medical.-Bibliothèque Homeopathique. –St. Louis Medical Journal.-Medical Investigator.—New England Medical Gazette.— Maanedsckrift für Homceopathi.—Revista Omiopatica.—La Reforma Medica.—Vaccination Inquirer.—Review Homcopa-Belge.—L'Omeopatia thiaue Italia.—New Herald. — Chironian. — Llandudno. A Winter Residence and a Summer Resort. — Climate of Llandudno. By James Nichol, M.D.—Croup: its Nature and Homosopathic Treatment. By Hurro Nauth Roy, M.L.S.—Report of the Melbourne Homosopathic Hospital, 1886. — Homoeopathy Gyneecology. By Thomas Skinner, M.D.—A Text Book of Materia Medica, Characteristic, Analytical, and Comparative. By A. C. Cowperthwaite, M.D., Ph.D., LL.D.—Annals British Homosopathic Society. August, 1886.—Diseases of the from the Organismic Skin Standpoint. By Dr. Burnett. -Hereditary Insanity. Bv 8. Lilienthal. — Chemist and Druggist's Diary.